TOWN OF WATERTOWN

REQUEST FOR QUALIFICATIONS

AGENT OF RECORD FOR:
PROPERTY/CASUALTY

The Town of Watertown requests proposals for an appropriate and qualified expert professional agent to respond to the following areas of responsibilities:

- Property/Casualty Agent of Record

Only proposals from experienced and reputable contractors will be considered. Request for Qualifications documents are available at the Town Hall Annex, 424 Main Street, Watertown, Connecticut 06796, Telephone (860) 945-5260, Monday through Friday, 8:30 am. to 4:30 p.m. or by accessing the Town’s website at www.watertownct.org.

Sealed proposals must be submitted no later than 4:00 p.m., Tuesday, May 12, 2015.

The Town of Watertown reserves the right to award in part, to reject any and all proposals in whole or in part, or to waive technical defects, irregularities and omissions, if in its judgment the best interests of the Town will be served.

Jason Warner
Purchasing Agent
Town of Watertown
424 Main Street
Watertown, CT 06795
TOWN OF WATERTOWN
REQUEST FOR QUALIFICATIONS
AGENT OF RECORD FOR:
• PROPERTY/CASUALTY

PART 1: GENERAL SPECIFICATIONS

1.0 OVERVIEW
The Town of Watertown and Watertown Board of Education (hereafter known as “Town”) is engaged in a process to select an appropriate and qualified expert professional agent to respond to the following areas of responsibilities:
• Property/Casualty Agent of Record

The purpose of this Request for Qualifications (RFQ) is to select a single insurance agency best qualified to represent all three of these areas of responsibilities on behalf of the Town.

1.1 SUBCONTRACTING
The agency shall not subcontract any part of the work under this project without approval of the Town of Watertown.

1.2 RIGHT OF SELECTION
The Town of Watertown reserves the right in whole or in part or waive any informality in proposals received if in his / her opinion; it is in the best interest of the Town to do so.

1.3 LICENSES AND CERTIFICATIONS
The agency shall maintain in good standing all the necessary licenses and certifications as required by Connecticut General Statutes and regulations. It is also a requirement that the agency have an insurance consultant licensed by the State of Connecticut who will take responsibility for the oversight of the Town’s account.

1.4 QUALIFICATIONS OF PROPOSER
The Town may make such investigations of any Respondent, as it deems necessary to determine the ability of the Respondent to perform the work. Respondent shall furnish to the Town all such information for this purpose as the Town may request.

1.5 TERM OF AGREEMENT
The agreement will cover a period of three (3) years commencing on July 1, 2015 and ending June 30, 2018 with an option to extend for two (2) additional one (1) year periods.

1.6 COMPANY INFORMATION
Responding firms must be capable of performing Agent of Record duties in full compliance with all federal and state statutes and regulations. Responding firms will provide the following information:
- Name of firm and parent company, if any.
- Address of firm's principal office and of the office from which the account will be serviced.
- Name, address, telephone numbers and email addresses of persons to receive notifications and reply to inquiries by the Town.

1.7 NON-COLLUSION
No proposer may contact any employee or elected or appointed official of the Town with respect to the RFQ or the submission of a bid.

1.8 INCURRING COSTS
The Town will not be liable for any costs incurred by a firm in the preparation or submission of this RFQ.

1.9 CIVIL RIGHTS COMPLIANCE

PART 2: SCOPE OF SERVICES

2A. PROPERTY/CASUALTY

2A.1 Develop a complete understanding of the Town’s areas of exposure and insurance coverage.

2A.2 Evaluate existing insurance contracts and claim histories and make recommendations concerning any changes, modifications, consolidations, and/or additions in the terms, conditions, and coverage limits needed to protect the interests of the Town.

2A.3 Identify programs, products, and insurers capable of meeting the Town’s insurance needs and prepare bid specifications for markets capable of quoting the upcoming renewals.

2A.4 Annually or as otherwise authorized by the Town, approach appropriate markets on behalf of the Town to obtain pricing with respect to the risk management program decided by the Town. If and when available, a minimum of at least two (2) quotes from reputable carriers will be obtained for each type of risk for each fiscal year of the contract. This may include specialty insurance coverage that may be outside the normal market.
2A.5 Present for Town consideration, in an understandable format, an evaluation of the results, including a comprehensive financial analysis, and a recommendation for selection of an insurer for each type of risk.

2A.6 Negotiate, on Town’s behalf, the details of insurance contracts with selected carriers and audit resulting policies, rates, coverage terms and conditions for compliance.

2A.7 Provide verification of coverage as needed by the Town to satisfy lessors, contractors, and other parties by means of preparing insurance certificates or endorsements.

2A.8 Provide training and education relative to loss control, safety, claims management and related topics in the area of risk management.

2A.9 Provide answers to Town staff and obtain clarification from underwriters and claim adjustors on coverage or claim questions.

2A.10 Provide periodic summaries on claims and work on behalf of the Town to ensure proper handling of reserving claims.

2A.11 Provide an annual stewardship report, including insurance schedule, policy summaries, review of past year’s activities and outlook for coming year’s market conditions.

2A.12 Inform Town staff or changing legislation and legal decisions affecting Town insurance/liability.

2A.13 Assist the Town in drafting insurance specifications for contracts and agreements as requested.

PART 3 QUALIFICATIONS STATEMENTS

3.1 Relevant Experience
Describe the expertise of the servicing office with regard to your knowledge and experience in working with those carriers who write public entity insurance in Connecticut.

Provide a list of those Connecticut municipalities which you are designated as their agent of record. Respondents should have provided similar services to a minimum of three (3) municipalities of towns similar in size to the Town of Watertown for at least five (5) years.

3.2 Experience of Account Team
Provide a description of the account team for the Town. Include resumes of each account team member and a thorough description of the roles, qualifications and municipal of each service team member.

3.3 References
List no less than three (3) client references for whom services similar to this RFQ are
currently or have previously been provided, as referenced in item 1 above. The list shall include the following information: name of organization, approximate gross cost of contract annually, dates services encompasses, services being provided and contact information. The Town reserves the right to contact these organizations regarding the services performed by the firm.

3.4 Additional Information
Please provide any other information that your firm believes would be important and pertinent to the Town in making their recommendations of award.

PART 4 COMPANY EXPERIENCE

4.0 To be considered, submitting firms must possess:
  • Prior experience Agent/Broker services, as outlined in the RFQ.
  • Prior experience in Agent/Broker services for other Connecticut municipalities.
  • Ability to deliver services as outlined in the RFQ.

PART 5 STAFF QUALIFICATIONS

5.0 Respondent’s shall provide a list of all personnel who would be involved with this account including:
  • Name
  • Job Title
  • Responsibilities
  • Type of Work Performed
  • Experience and Credentials

PART 6 COMPANY RESPONSIVENESS

6.0 Responding firms shall provide evidence of their firm's capability to apply and commit staff and resources successfully to meet the Town of Watertown’s need for Agent of Record services.

PART 7 INSURANCE

7.0 Responding firms shall have the capability of maintaining insurance as follows to cover any claims incurred or arising as a result of the work:
  • Professional Liability Insurance with a limit of liability not less than $1,000,000
  • Commercial General Liability Insurance with a limit of liability not less than $1,000,000
  • Automobile Liability Insurance with a limit of liability not less than $1,000,000
  • Workers' Compensation Insurance as required by Connecticut Statute for work performed and Employers' Liability coverage with a limit of liability not less than $100,000.

PART 8 DEADLINE and RESPONSE
The deadline for all responses shall be: **4:00 p.m., Tuesday, May 12, 2015.** Late submissions will not be considered. Email or fax proposals will not be accepted.

Deadline for written questions shall be: **4:00 p.m. Tuesday, May 5, 2015.** In the event it becomes necessary to revise or supplement any part of the RFQ, the revision or supplement will be provided to all prospective firms either by U.S. mail or by e-mail.

Respondents shall deliver/mail (5) copies of their proposals to:

- Jason Warner
- Purchasing Agent
- Town Hall Annex
- 424 Main Street
- Watertown, CT 06795
TOWN OF WATERTOWN

PROPOSAL

AGENT OF RECORD FOR:
• PROPERTY/CASUALTY

Firm: ______________________________________________________________

Name: ______________________________________________________________

Street: ______________________________________________________________

City: ___________________ State: _______ Zip: __________

Name: ______________________________________________________________

Telephone Number: ________________________________________________

Fax Number: _____________________________________________________

Email: ____________________________________________________________

Signed: ___________________________ Date: __________________________

YEAR ONE:

Property/Casualty: ___________________________

YEAR TWO:

Property/Casualty: ___________________________

YEAR THREE:

Property/Casualty: ___________________________
OPTIONAL YEAR FOUR:

Property/Casualty: _________________

OPTIONAL YEAR FIVE:

Property/Casualty: _________________
RECEIPT OF ADDENDA

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NAME OF BIDDER: __________________________________________________________

OFFICIAL ADDRESS: ______________________________________________________

PHONE NUMBER: _______________________________________________________

BY: __________________________ TITLE: __________________________
    (Please Print)

DATE: ________________________________________________________________

SIGNATURE: ____________________________________________________________