



ICMA
Pakistan

Tender No.: F-69/ICMAP/Gp.Insr.Membs /Tender/2018

Tender Documents

TERMS OF REFERENCES (TORs) TECHNICAL BID FORM

for

Group Life Insurance for Institutes' Members and Institutes' Employees of ICMA Pakistan

Name of the Company	:	_____
Address	:	_____
Contact No.	:	_____
Ref	:	Pre-Qualified Contractors/Vendors/Suppliers
Issued on	:	Dated: 07-12-2018
Received by	:	Pre-qualified Vendors
Time and Dated of Submission	:	Time: At 11:00 a.m. Dated: 28-12-2018
Time and date of opening of Tender	:	Time: At 11:30 a.m. Dated: 28-12-2018
Special Instruction	:	The bidders may apply for the work as specified and provided attached Financial Bid

For Issuance and Submission of Tender

Jawed Hakeem

Head of Administration

Institute of Cost and Management Accountants of Pakistan

Head Office: ST-18/C, ICMAP Avenue, Block 6,

Gulshan-e-Iqbal, Karachi-75300.

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Phone # 021-99243026

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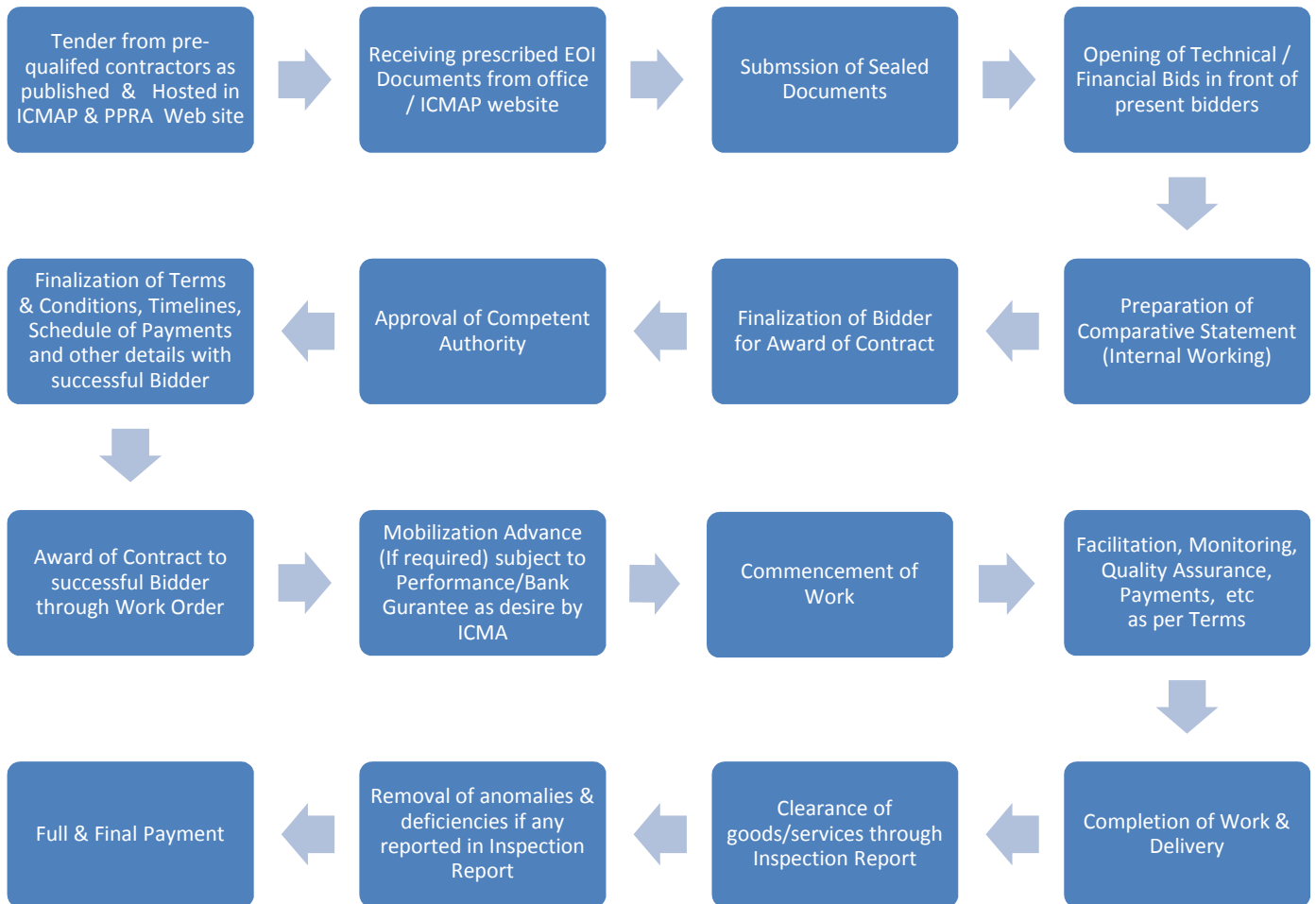
Sr.	Descriptions
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Brief Introduction of the Bidding Organization

Sr.	Requirements	Descriptions
1	Name of the Company	: _____
2	Date of Establishment	: _____
3	Corporate Status (Proprietor / Partnership / Pvt. Ltd. / Ltd.)	: _____
4	Company Registration No.	_____
5	N.T.N No.	: _____
6	G.S.T No.	: _____
7	Name of Owner / Proprietor / MD / CEO	: _____
8	CNIC No.	: _____
9	Mailing Address (Registered and Operational Offices)	: _____
10	Contact / Cell No(s).	: _____
11	Fax No(s).	_____
12	Email Address	: _____
13	Bank Name & Account No. (for which statement is enclosed)	: _____

Company's Stamp		Signature

Evaluation & Flow of Process



Evaluation Weightage

- **Technical : 60%**
- **Financial : 40%**

TECHNICAL BID FORM

List of major Clients with Contact Person

Sr.	Client	Concerned Officer(s) of Organization	Contact / Cell No.	Email

Use extra sheet in the same format if required.

Company's Stamp	Signature

TECHNICAL BID FORM
RESOURCE PERSONS

Details of Resource Persons attached full-time / part-time

Sr.	Resource Person's Name	Designation	Qualification	Years of Experience

Use extra sheet in the same format if required.

Company's Stamp	Signature

Technical Evaluation Criteria for Group Life Insurance for Members

S. #	Description	Criteria	Marks Break Up	Marks Obtained
1	Date of Incorporation of the Company (Letter of Incorporation, Company Registration, Letter of Declaration)	Above 10 Years	10	
		Above 5 Years	7	
		Below 5 Years	0	
2	Total Numbers of Branches in all provinces (Including, Khi, Hyd, Quetta, Mul, Lhr, Fais, Rwl, Isb Complete Address, Landline Numbers, Cell Nos., etc.)	50 and above	10	
		10 and above	7	
		Below 10	0	
3	Renowned Companies on Clientele List (Attach Details of Company, Contact Persons, Contact details, etc.)	120 and above	10	
		100 and above	7	
		Below 100	0	
4	Number of Persons on the Payroll of the Company (Attach Details of Employees)	400 and above	10	
		300 – 500	7	
		100 - 300	5	
		Below 100	0	
5	Gross Premium in 2015 (Attach Details)	5 Billion and above	10	
		4 Billion and above	7	
		3 Billion and above	5	
		Below 2 Billion	0	
6	Total Gross Premium – Last 3 Years (Attach Details)	25 Billion and above	10	
		20 Billion and above	7	
		15 Billion and above	5	
		Below 10 Billion	0	
7	Total Assets as on Dec' 2015 (Attach Details)	5 Billion and above	10	
		4 Billion and above	8	
		3 Billion and above	5	
		Below 2 Billion	0	
8	Experience in Educational Sector	Above 10 Years	10	
		7- 10 Years	7	
		4- 7 Years	5	
		Below 4	0	
9	Issued, Subscribed & Paid up Share Capital	Less than Rs. 300 Million	5	
		Rs. 200 Million to Rs. 100 Million	7	
		Above Rs. 1,000 Million	10	
10	PACRA	10	AAA	
		8	AA	
		5	A	
11	Minimum Life Fund (Under Insurance Portfolio)	Less than Rs. 5 Billion	5	
		Rs.5 Billion to 10 Billion	8	
		Above Rs. 10 Billion	10	
10	JCR - VIS	10	AAA	
		8	AA	
		5	A	

Company Stamp

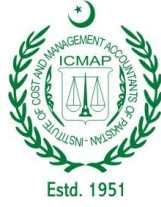
Signature

Requirements/TORs:

1. The Insurance Company should be able to provide services nation-wide;
2. The Insurance Company should have minimum **5 years experiences** in Group Life Insurance services;
3. All participants of the tender will be required to submit **3% earnest money** as security deposit to be refunded in case of non-qualification;
4. Tenders should be submitted on ICMA Pakistan's prescribed format with stamp of the organization otherwise these will be rejected;
5. To participate in the tender, it is necessary to meet above technical requirements as mentioned in the bid documents.
6. The participants must submit valid NTN & G.S.T Certificate, affidavit that the company has never been black-listed, last 6-month bank statement, list of clients with contact numbers;
7. Quotation / rates should be valid for three months from the date of opening of bid;
8. The rates should include Income tax & G.S.T and inclusive of all other taxes.
9. The payment will be made within **a month days** after submission of invoice and receiving satisfaction certificate;
10. The services will be started within a day as mentioned in contract / Work Order / Agreement;
11. Incomplete bid / proposal or those received after deadline date and time will not be entertained;
12. In case of Tax exemption, tax exemption certificate will be required along with Invoice;
13. The sealed quotations should be submitted to **Head of Administration**, ICMA Pakistan, Head Office Building, ST-18/C, ICMAP Avenue, Block – 6, Gulshan-e-Iqbal, Karachi;
14. The Tenders / Bids will be opened on **as per schedule given in the tender documents.**
15. The Insurance Company shall be bound to provide and execute the detail agreement with ICMA Pakistan along with all clauses of Insurance policies as per international and local practice in accordance with the prevailing law of the country.
16. ICMA Pakistan reserves the rights to accept or reject any tender without assigning any reason;

Company's Stamp

Signature



ICMA
Pakistan

Tender No.: F-69/ICMAP/Gp.Insr.Membs /Tender/2018

Tender Documents

TERMS OF REFERENCES (TORs) FINANCIAL BID FORM

for

Group Life Insurance for the Institutes' Members and institutes' Employees of ICMA Pakistan

Name of the Company	:	_____
Address	:	_____
Contact No.	:	_____
Ref	:	Pre-Qualified Contractors/Vendors/Suppliers
Issued on	:	Dated: 07-12-2018
Received by	:	Pre-qualified Vendor
Time and Dated of Submission	:	Time: At 11:00 a.m. Dated: 28-12-2018
Time and date of opening of Tender	:	Time: At 11:30 a.m. Dated: 28-12-2018
Special Instruction	:	3% of bid /earnest money of quoted amount

For Issuance and Submission of Tender

Jawed Hakeem

Head of Administration

Institute of Cost and Management Accountants of Pakistan

Head Office: ST-18/C, ICMAP Avenue, Block 6,

Gulshan-e-Iqbal, Karachi-75300.

www.icmap.com.pk / email: admin@icmap.com.pk

Phone # 021-99243026



Institute of Cost and Management Accountants of Pakistan
Administration Department

Tender No.: F-69/ICMAP/Gp.Insr.Membs /Tender/2018

Financial Bid Form

Issued to : _____
Advertisement Reference : _____
Issued on : _____ Issued by : _____

Head of Administration
Administration Department,
ICMAP Head Office,
Karachi.

OPTION 1:

Number of Members to be covered are 2402 for the following

SR. #	Description	Sum Assured	Unit Rates	Amount in Rs.
01.	Death Benefit (Natural) – (up-to 68th birthday)	Rs. 1,500,000/-		
02.	Death Benefit (Accidental) – (up-to 68th birthday)	Rs 3,000,000/-		
03.	Additional Accident Death Benefit (ADB) – (up-to 68th birthday)	As per clause of Insurance policy		
04.	Accidental Disability Benefit: Permanent Total Disability (Own and Similar Occupation) – (TPDA Own) – (up-to 68th birthday)	-Do-		
05.	Terminal Illness Benefit	-Do-		
	Total Annual Premium for all Coverage			

Special Note:

- Bid(s) would be finalized after evaluation of “**Technical & Financial**” proposals as per Evaluation Weightage.
- ICMA Pakistan may reject all bids or proposals at any time prior to acceptance of bid or proposal.
- Please specify terms and conditions, if any.

Company's Stamp

Signature

Head of Administration
Administration Department,
ICMAP Head Office,
Karachi.

OPTION 2:

Sr. #	Description	Premium Amount in Rs.
A	<u>Nationwide Permanent ICMAP Employees:</u> Total No. of Employees: 213	
B	<u>Category Wise Details of Employees:</u> M= 13 ; E= 22; O= 53; A=60; S= 45 & G= 20.	
C	<u>Free Cover Limit:</u> M= Rs. 500,000/=; E= Rs. 450,000/=; O= Rs. 400,000/=; A= Rs. 350,000/= S= Rs. 300,000/=; and G= 250,000/=	
D	<u>Eligibility Definition:</u> All eligible Employees up-to 60 years of age	
E	<u>Premium Mode:</u> Annual	
F	<u>Sum Insured:</u>	
1	Life Insurance	
2	Accidental Death Insurance (Additional)	
3	Permanent Total / Partial Total Disability (Due to accident)	
4	Temporary Total Disability (Due to accident)	
5	Permanent Total Disability (Natural)	
6	Terminal Illness Benefit	
7	Accidental Disability Benefit: Permanent Total Disability (Own & Similar Occupation) (PTDA Own)	
8	Accrued Profit Commission Adjustment *	
9	Premium Payable as per the received data	
	<u>Duration of Insurance:</u> 02 Years	
	<u>Duration:</u> Start From September 01, 2018 to August 30, 2020	
	<u>Taxes:</u> Inclusive of all Govt. Applicable Taxes (Federal & Provincial)	
	<u>Mode of Payment:</u>	
	<u>Total Premium on Annual Basis in Rs.</u>	
	<u>Amount in Words</u>	

Company's Stamp

Signature

OPTION 3:

Census Details	A	B	C	Total
Employees	13	75	125	213
Spouses	10	53	93	156
Children	30	131	226	387
Total	53	259	444	756
BENEFITS DESCRIPTION PLANS		A	B	C
HOSPITALIZATION EXPENSE BENEFIT:				
* Total Hospital; Surgical & Misc. expenses inclusive of Daily Room Rent Charges <u>Per Annum Per Insured</u>		75,000	60,000	40,000
* Daily Room Rent Limit		13,170	5,390	3,910
* Additional Hospitalization limit available incase of Hospitalization due to Accidental Injuries		37,500	30,000	20,000
*Pre-Hospitalization Diagnostic Tests, Consultations & Medicines restricted to 30 days before Hospital Confinement		COVERED		
*Post-Hospitalization Diagnostic Tests, Consultations & Medicines restricted to 30 days after Hospital Confinement)				
*Day Care Surgeries: Dialysis, MRI, CT Scan, Endoscopy, Pet Scan from OPD; Treatment of Fractures & Lacerated Wounds; Local Road Ambulance for Emergencies only; Emergency Dental treatment due to Accidental Injuries (within 48 hours for pain relief only)				
MATERNITY EXPENSE BENEFIT:				
* Normal Delivery		106,000	65,730	44,220
* C-Section / Multiple Births		183,300	130,340	101,220
MAJOR MEDICAL CARE:				
Annual Limit Per Insured Member		275,000	250,000	225,000
IMPORTANT TERMS				
1- Maximum Eligibility Age:		2- Pre-Existing Conditions:		
* Hospitalization Expense Benefit	65 years for Employees & Spouse 25 years for dependent sons No age limit for dependent unmarried daughters	* All Pre-Existing conditions are covered, subject to policy terms and conditions.		
* Comprehensive Hospitalization Expense Benefit	60 years for Employees & Spouse			
		25 years for dependent sons No age limit for dependent unmarried daughters		
PREMIUM DETAILS				
Hospitalization + Maternity + Comprehensive Hospitalization Expense Benefit				
All Applicable Taxes				
Net Premium payment on Annual Basis (w.e.f January 01, 2019 To December 31, 2020)				