

PART – 1 (Technical Bid)

Annexure- 'A'
(Terms & Conditions)

Coverage of Group Accidental Insurance

Sr. No.	Coverage	
	Scope of Cover	Worldwide 24x7x365
1	Sum Insured	2,00,000/- per student
2	Age Bracket	1. 17-30 years 2. 30-45 years
3	Accidental Death	Covered
4	Permanent Total Disablement	Covered
5	Partial Total Disablement	Covered
6	Accidental Hospitalization Cover	Sum Insured up to Rs.1,00,000/- per insured member
7	Ambulance Cover	Covered
8	Repartition of Mortal Remains	Covered
9	Death or Disability due to Snake Bite	Covered
10	Terrorism Clause	Covered

Date:

**Signature of Authorized
Official with Designation and Stamp**

PART – 1 (Technical Bid)**Annexure-'B'****General Information of bidder/Insurance Companies**

Sr. No	Description	Particulars (To be filled by Insurance Agency/Company/Broker)
1	Name and address of the Insurer	
	Name and address of Broker/Agency (attach proof of Broker/Agency)	
2	Fax/ e-mail address	
3	Phone No. (Office)	
4	Name, designation, contact no. and email address of the official of the Insurer to whom all the references shall be made	
5	Insurer to whom all the references shall be made at	
(a)	Head Office (HO)-	
(b)	Divisional Office (DO)-	

Date:

Signature of Authorized
Official with Designation and Stamp

PART – 1 (Technical Bid)

Annexure-‘C’

FORM OF DECLARATION

We, M/s _____ (name of Bidder/insurer)
having its registered office at _____ (hereinafter
referred to as ‘the Bidder/Supplier’) having carefully studied completed Tender document & its
Terms & conditions etc. and all corrigendum (if any) pertaining to the “Group Accidental
insurance policy for Students” the local and site conditions and having undertaken to execute the
said works, **DO HEREBY DECLARE THAT:**

- 1) We are familiar with all the requirements of the Contract and have not been influenced by any statement or promise of any person of the Employer.
- 2) We undertake that all the documents uploaded along with the Tender document have been read and there is no deviation from the terms and conditions of the Tender document including Corrigendum/Addendum (if any). The submitted Technical Bid/ Financial Bid proposals are without any deviations and are strictly in conformity with the documents issued by the Employer.
- 3) We are experienced and competent Bidder to perform the Contract to the satisfaction of Employer and are familiar with all general and special laws, acts, ordinances, rules and regulations of the Government of India that may affect the work, its performance or personnel’s employed therein.
- 4) The above statement submitted by us is true and correct to our best knowledge.

Date:

For and on behalf of the Bidder/Insurer

.....
(Signature of authorized representative of the
Bidder/Insurer, along with his name, Seal of Company)

Annexure-‘D’

PART – 2 (Financial Bid)

Schedule of Premium / Bill of Quantities (BOQ)					
Subject: Group Accidental Insurance Policy for Students of Guru Angad Dev Veterinary and Animal Sciences University, Ludhiana					
Sr. No.	Description of Words	Approx. No of Students	Annual premium per student (in Rs.) In figures	Annual premium per student (in Rs.) In Words	Total Annual premium (in Rs.) In Figures
1.	Insurance for students for a sum of Rs. 2,00,000/- (Rupees Two Lakh Only) per student with Accidental Hospitalization Cover for a sum of Rs. 1,00,000/- (Rupees One Lakh Only) per insured member	1500 minimum			
2.	GST, if as applicable				
3.	Stamp				
Age Limit: 18-35 year and 35-45 year					
Total Amount / Annual Premium (Rs.)					

Note:

1. In case of discrepancy between Annual premium per person quoted in figures and words, the Annual premium per person quoted in words shall be prevail/ considered.
2. GST (if applicable) & Stamp duty which shall be paid as per actual by Guru Angad Dev Veterinary and Animal Sciences University.

Date:

Place:

Signature of Authorized Official with
Designation and Stamp

PART – 2 (Financial Bid)**Annexure-‘E’****BANK ACCOUNT DETAILS**

Sr. No.	Particulars	#To be filled by bidder(s)
1	Name of Bidder as per Bank record	
2	Bank account number	
3	Bank name	
4	Branch address	
5	IFSC Code	

#Copy of cancelled cheque may also be attached

For and on behalf of the bidder /Supplier

.....

(Signature of authorized representative of
the Bidder/Supplier, along with his name, Seal of Company)