

EXHIBIT B
PROPOSAL FORM

Agency Name _____

Address _____

Date Established _____

Brief Description of Agency's Historical Background:

Agency Experience and Qualifications

1. Is agent/broker licensed in the State of Minnesota for all property/casualty insurance lines? Yes _____ No _____
2. Describe your continuous experience with business or commercial insurance for the previous five (or more) years.

3. List all other governmental risks written by proposer in the last five years.

Governmental Unit

Telephone

Insurer

4. Furnish all the following information concerning your agent's Professional Liability Insurance:

Name of Insurer:

Limit of Liability:

Deductible:

If your firm does not carry such insurance, please check here. _____

5. List all companies represented through direct agency contracts (indicate if the company

actively writes and services governmental risks).

<u>Company</u>	Writes Governmental Risks:	
	<u>Yes</u>	<u>No</u>

6. List your agency's premium volumes rates, by category, as follows:

Personal Lines _____

Governmental Lines _____

Commercial Lines _____

Rate Categories:

- 1 Under \$500,000
- 2 \$501,000 to \$1,000,000
- 3 \$1,000,001 to \$2,500,000
- 4 Over \$2,500,000

If your office is a branch or subsidiary office of a national or multi-office firm, also show the same information for your office.

7. **Staffing.** For each agent, administrative or technical person, loss control engineer and inspector who would be assigned to our account, provide the following. If additional

space is needed, use blank paper and attach to the proposal.

Name #1:

Title:

Hourly Fee:

Experience:

Professional designations and education:

Name # 2:

Title:

Hourly Fee:

Experience:

Professional designations and education:

Name #3:

Title:

Hourly fee:

Experience:

Professional designations and education:

Name #4:

Title:

Hourly fee:

Experience:

Professional designations and education:

Name #5:

Title:

Hourly fee:

Experience:

Professional designations and education:

Name #6:

Title:

Hourly fee:

Experience:

Professional designations and education:

8. Describe any other agency or company resources or special qualifications:

13. Are you willing to serve on a Fee-for-Service rather than a Commission basis?
Yes _____ No _____

If not, provide your commission percentages by coverage line.

Commercial package _____

Automobile _____

Workers' Compensation _____

Other (describe)

14. Fees for Service.

Provide fees for the following activities:

1st Yr

2nd Yr

3rd Yr

Conduct an exposure survey

Analyze policies and identify gaps, overlaps, failures to dovetail, structural deficiencies in the policies	_____	_____	_____
Assist in drafting insurance specifications	_____	_____	_____
Obtain quotes, negotiate and make recommendations for placement of all required insurance	_____	_____	_____
Assess the stability of the proposed insurer including its re-insurance	_____	_____	_____
Audit outstanding claim reserves in excess of \$5000	_____	_____	_____
Provide certificates of insurance	_____	_____	_____
Process requests for endorsements to the policies (new vehicles, new buildings)	_____	_____	_____
Provide annual stewardship report discussing previous year's experience, future concerns and exposures, goals and objectives for the future	_____	_____	_____
Review policies, billings, claims	_____	_____	_____
Assist in loss control program in addition to insurer's services	_____	_____	_____
Update insurable values	_____	_____	_____