#  (Only on Bidder’s Letterhead)

# Form of Bid -A

To: **Department Procurement Committee,**

**Ceylon Shipping Corporation Limited**

**No.27, MICH Building, Sir Razik Fareed Mawatha,**

**Colombo, Sri Lanka**

I/We, the undersigned, hereby confirm our full understanding and acceptance of the terms, conditions, and instructions detailed in the referenced Bid. We further commit to providing the services specified therein, in strict accordance with the terms outlined, and at the premium rate indicated in our policy.

Additionally, we acknowledge that the Company reserves the right, at its discretion, to reject any or all bids or to accept any portion of a bid that best serves the Company’s interests, without obligation to provide justification. We also understand that the Company is not required to accept the lowest bid.

|  |  |
| --- | --- |
| Name of the Bidder: |  |
| Bidder’s Business Registration No: |  |
| Authorized Signature of the Bidder: |  |
| Name & Title of the Authorized Signatory: |  |
| Address: |  |
| Telephone and Fax Nos.: | Telephone Nos.: |  |
|  | Fax Nos.: |  |
| Address: |  |
| Date: |  |
| Seal: |  |

# (Only on Bidder’s Letterhead)

**Form of Bid -B**

**To: Department Procurement Committee,**

**Ceylon Shipping Corporation Limited**

**No.27, MICH Building, Sir Razik Fareed Mawatha,**

**Colombo, Sri Lanka**

|  |  |  |
| --- | --- | --- |
|  | **Mv. Ceylon Breeze** | **Mv. Ceylon Princess** |
| **Sum Insured** | **US$.24,667,500.00** | **US$.25,300,000.00** |
| Period of Cover  | From 24:00 hrs.27/01/2025 to 24:00 hrs.28/01/2026 | From 24:00 hrs.27/01/2025 to 24:00 hrs.28/01/2026 |
| Premium (Ex. Collision) Hull Increased ValueWar |  |  |
| Premium (Incl. 3/ 4th Collision) Hull Increased ValueWar |  |  |
| Express Warranties |  |  |
| Trading Limits |  |  |
| Conditions (applicable Clauses) |  |  |
| Any continuity Credit / NCB |  |  |
| Payment terms / Conditions |  |  |
| The Law & Jurisdictions |  |  |
| Deductible/Excess | US$ 50,000.00 |  |  |
| USD 75,000.00 |  |  |
| US$100,000.00 |  |  |

* Fitch Rating for the Company - Minimum A credit rating
* S&P Rating for the Re-insurer - Minimum A Credit rating

We hereby declare that we are bound by the above stated conditions and premiums, throughout the cover period.

**Date Authorized Signatory Company Frank**

# (Only on Bidder’s Letterhead)

# Form of Bid -C

**To: Department Procurement Committee,**

**Ceylon Shipping Corporation Limited**

**No.27, MICH Building, Sir Razik Fareed Mawatha,**

**Colombo, Sri Lanka**

**Compliance Sheet**

|  |  |  |
| --- | --- | --- |
| "The quotations have been submitted separately (ITB Clause 1) | **Attached / Not Attached****Agreed / Disagreed** | **Attached / Not Attached****Agreed / Disagreed** |
|  |  |
| Premium (Ex. Collision) Hull Increased Value War Premium (Inc!. 3/ 4th Collision) HullIncreased Value War(ITB Clause 3 C & 3 D) **(Attached/Not Attached)** |  |  |
| Submission of the Local Insurance company registration certificates, licenses, and tax clearance.(ITB Clause 5 IV) **(Attached/Not Attached)** |  |  |
| Submission of the Background, experience, and Certification of the Local Insurance Company(ITB Clause 5 I) **(Attached/Not Attached)** |  |  |
| Submission of the Local Insurance company a valid registration with the Insurance Regulatory Commission of Sri Lanka(ITB Clause 4 I) **(Attached/Not Attached)** |  |  |
| Submission of documents for minium of Ten (10) years’ experience in providing H&M , War insurances to commercial vessels, with reference to similar accounts.(ITB Clause 4 II) **(Attached/Not Attached)** |  |  |
| Submission of documents about documented relationships or partnerships with leading international marine underwriters or Clubs capable of underwriting H&M, War insurances policies.(ITB Clause E 4 III) **(Attached/Not Attached)** |  |  |
| Submission of Audited financial statements from the past three years, demonstrating financial capacity and reliability.(ITB Clause 3 E 4 IV) **(Attached /Not Attached)** |  |  |
| Submission references from at least two maritime clients(ITB Clause 4 II) **(Attached/Not Attached)** |  |  |
| Submission of the certified copy to confirmFitch rating of the Local Company(ITB Clause 5 II (d) ) **(Attached /Not Attached)** |  |  |
| Submission of the certified copy to confirmthe Standard & Poor rating for Re-insurer(ITB Clause 3 C) **(Attached /Not Attached)** |  |  |
| Submission of the certified documentsverifying financial position of Re-insurer(ITB Clause 3 C) **(Attached /Not Attached)** |  |  |
| All the payment terms approved uponawarding of the contract shall continuewithout any change throughout the period ofcover. (Payment due to changes in Govt.taxes, levy & fees etc., are allowed and theinsurer must clearly provide specificexplanations in this regard).(ITB Clause 9) **(Agreed /Disagreed)** |  |  |
| Premium payable to the insurer shall bepaid by the insured in USD and 100% of the insurance claimsshall be paid in USD.(ITB Clause 8) **(Agreed/Disagreed)**Or Insurer's proposals regarding claim payment are also considered. |  |  |
| Premium payable to the insurer shall bepaid by the insured in LKR based on theUSD rate calculated on the date of theInvoice and 50% of the insurance claimsshall be paid in USD.(ITB Clause 8) **(Agreed/Disagreed)**Insurer's proposals regarding claim payment are also considered. |
| Submission of Bid Security(ITB Clause 6) **(Attached /Not Attached)** |  |  |

**Date Authorized Signatory Company Frank**

# (Only on Bidder’s Letterhead)

# Form of Bid -D

|  |
| --- |
| PROCUREMENT GUIDELINE REFERENCE **5.3.13** **Format for Bid Security Guarantee** |
| *[this Bank Guarantee form shall be filled in accordance with the instructions indicated**in brackets]*----------------------------------- [insert issuing agency’s name, and address of issuing branch or office] -----**Beneficiary** : ------------------------[insert (by PE) name and address of Employer/Purchaser]**Date :**  ------------[insert (by issuing agency) date]**BID Guarantee No:** ----------------[insert (by issuing agency) number]We have been informed that ----------------- [insert (by issuing agency) name of the Bidder: if a jointventure, list complete legal names of partners] (hereinafter called “the Bidder”) has submitted toyou its bid dated ------------- [insert (by issuing agency) date] (hereinafter called “the Bid”) for theexecution/supply [select appropriately] of [insert name of Contract] under Invitation for Bids No.-------------------- [insert IFB number] (“the IFB”).Furthermore, we understand that, according to your conditions, Bids must be supported by a BidGuarantee.At the request of the Bidder, we --------------------- [insert name of issuing agency] hereby irrevocableundertake to pay you any sum or sums nor exceeding in total an amount of ------------------ [insertamount in figures]-----------------[insert amount in words]upon receipt by us of your first demand inwriting accompanied by a written statement stating that the Bidder is in breach of its obligation(s)under the bid conditions, because the Bidder :1. has withdrawn its Bid during the period of bid validity specified ; or
2. does not accept the correction or errors in accordance with the Instructions to

Bidders (hereinafter “the ITB”) of the IFB ; or1. having been notified of the acceptance of its Bid by the Employer/Purchaser during the

period of bid validity, (i) fails or refuses to execute the Contract Form, if required, or (ii)fails or refuses to furnish the Performance Security, in accordance with the ITB.This Guarantee shall expire : (a) if the Bidder is the successful bidder, upon our receipt of copiesof the Contract signed by the Bidder and of the Performance Security issued to you by the Bidder,or (b) if the Bidder is not the successful bidder, upon the earlier of (i) our receipt of a copy of yournotification to the Bidder that the Bidder was unsuccessful, otherwise it will remain in force upto--------------------- (insert date)Consequently, any demand for payment under this Guarantee must be received by us at the officeon or before that date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[signature(s) of authorized representative(s)] |