

KATHY HOCHUL
Governor



ADRIENNE A. HARRIS
Superintendent

Use this form to address Minimum Bidder Qualifications (Pass/Fail)

Bidder Name: _____

Bidder must meet the minimum qualifications set forth below and certify that they meet the minimum Bidder requirements mentioned below. Failure for Bidder to meet, and to certify that they meet, the minimum qualifications may result in the Bidder's Proposal being deemed disqualified, deemed non-responsive, and eliminated from consideration.

In completing the form, please provide **clear and accurate descriptions of the Bidder's experience for the Minimum Qualifications**. The Department will not interpret omissions and vagueness in the Bidder's favor. Further, in completing the form, type to expand response areas on form or attach additional sheets, as necessary.

Note: Bidder's only need to submit one Attachment 8 - Minimum Bidder Qualification form regardless of the number of lots the Bidder is submitting proposals for.

Attachment 8: Minimum Bidder Qualifications

Failure to meet all requirements in this Attachment 8 **will** result in the Proposal being deemed non-responsive and eliminated from consideration.

Qualification 1: Bidder must have a minimum of three (3) years of experience performing similar functions as described in Section 4 of this RFP.

The Department reserves the right to contact the Client Points of Contact to validate experience.

*The Bidder may add more projects as necessary to show experience. However, the bidder should only provide projects that support meeting the minimum bidder qualifications.

The Bidder represents and warrants that it has a minimum of three (3) years of experience performing similar functions as described in Section 4 of this RFP.

Yes No

Project #1 Name

Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)

Client Name(s)

Client Point of Contact

Phone Number	
Email Address	
Explain in detail the Bidder's experience performing similar functions as described in Section 4 of this RFP.	
<u>Project #2 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Email Address	
Explain in detail the Bidder's experience performing similar functions as described in Section 4 of this RFP.	
<u>Project #3 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Email Address	
Explain in detail the Bidder's experience performing similar functions as described in Section 4 of this RFP.	
<u>Project #4 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Email Address	
Explain in detail the Bidder's experience performing similar functions as described in Section 4 of this RFP.	
<u>Project #5 Name</u>	

Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Email Address	
Explain in detail the Bidder's experience performing similar functions as described in Section 4 of this RFP.	

Qualification 2: Bidder must have performed, at a minimum, three (3) rate studies in auto insurance industry in the past three (3) years with an Actuary.

The Department reserves the right to contact the Client Points of Contact to validate studies performed.

*The Bidder may add more studies performed as necessary to show experience. However, the bidder should only provide projects that support meeting the minimum bidder qualifications.

The Bidder represents and warrants that it has performed, at a minimum, three (3) rate studies in the auto industry past three (3) years with an Actuary.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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<u>Project #1 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Email Address	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
<u>Project #2 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Point of Contact	
Phone Number	
Email Address	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
<u>Project #3 Name</u>	

Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
<u>Project #4 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
<u>Project #5 Name</u>	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	

<p>Qualification 3: Bidder must have performed three (3) rate studies in the past three (3) years with a Fellow of the Casualty Actuary Society.</p> <p>The Department reserves the right to contact the Client Points of Contact to validate studies performed.</p> <p>*The Bidder may add more studies performed as necessary to show experience. However, the bidder should only provide projects that support meeting the minimum bidder qualifications.</p>	
<p>The Bidder represents and warrants that it has performed three (3) rate studies in the past three (3) years with a Fellow of the Casualty Actuary Society.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

Project #1 Name	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Email Address	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
Project #2 Name	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Point of Contact	
Phone Number	
Email Address	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
Project #3 Name	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	
Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.	
Project #4 Name	
Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)	
Client Name(s)	
Client Point of Contact	
Phone Number	

<p>Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.</p>	
<p>Project #5 Name</p>	
<p>Dates (month/year) of Experience (including date the project started and ended or is scheduled to end)</p>	
<p>Client Name(s)</p>	
<p>Client Point of Contact</p>	
<p>Phone Number</p>	
<p>Explain in detail the Bidder's experience in performing the rate studies for similar functions as outlined in this RFP.</p>	

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