



AGENSI KAUNSELING DAN PENGURUSAN KREDIT

**DIRECTOR AND OFFICERS LIABILITY
TAKAFUL/INSURANCE**

(REF: AKPK/RFQ19/JUL01)

**Request for Quotation
[RFQ]**

Issuer

Agensi Kaunseling Dan Pengurusan Kredit
Level 14, Menara TH Perdana
1001 Jalan Sultan Ismail
50250 Kuala Lumpur

ISSUE DATE : 25 July 2019

CLOSING DATE/TIME : 09 August 2019/ 3:00pm

1.0 INTRODUCTION

The purpose of this Request for Quotation (RFQ) is to enquire from the respective vendors to quote for Director and Officer's Liability Takaful/Insurance as specified below.

2.0 SPECIFICATION

The specification for the deliverables in **Appendix D**.

3.0 SUBMISSION OF DOCUMENTS AND PROPOSAL

a) Provide the following information/documents as Solution Proposal, as per checklist **Appendix A**

(i) Attach relevant Suruhanjaya Syarikat Malaysia's (SSM) documents as follows:-

For Enterprise Company

- ✓ Company Profile
- ✓ Corporate Information
- ✓ Form D

For Sendirian Berhad & Berhad Company

- ✓ Company Profile
- ✓ Memorandum and Articles of Association
- ✓ Corporate Information
- ✓ Form 49
- ✓ Form 9 (Sendirian Berhad) & Form 8 (Berhad)

(ii) Latest Audited Financial Statements

(iii) Fill up the Person In-Charge Form.

(iv) Fill up the Company Profile Form.

(v) Declaration of any relationship with AKPK Board members or Staff i.e. parents, spouse, children, siblings (if any)

b) Provide the following information/documents as Cost Proposal (**Appendix B**)

(i) Provide **Official Company Quotation** for the Deliverables. (Vendor **must** submit this and refer to Item No. 8 '**VALIDITY OF THE QUOTATION**' for the validity period of the Quotation)

(ii) Fill up the Cost Summary.

(iii) Provide Bank Info.

4.0 METHOD OF SUBMISSION

By hand ONLY, proposals to this RFQ must be deposited in a sealed envelope into tender box at:

**Level 14, Menara TH Perdana,
1001, Jalan Sultan Ismail,
50250 Kuala Lumpur.**

The proposals to be submitted in a **separate cover, sealed envelope** and to be labelled clearly as follows:

i) Solution Proposal (Appendix A)

“NOTE: DO NOT OPEN. SOLUTION PROPOSAL ENCLOSED FOR DIRECTORS AND OFFICERS LIABILITY TAKAFUL/INSURANCE, RFQ# AKPK/RFQ19/JUL01 SUBMITTED BY [VENDOR’S NAME HERE]”

(Note: Should submit 3 sets of copies – 1 original, 2 photocopies in one envelope)

ii) Cost Proposal (Appendix B)

“NOTE: DO NOT OPEN. COST PROPOSAL ENCLOSED FOR AKPK DIRECTORS AND OFFICERS LIABILITY TAKAFUL/INSURANCE, RFQ# AKPK/RFQ19/JUL01 SUBMITTED BY [VENDOR’S NAME HERE]”

(Note: Should submit 3 sets of copies – 1 original, 2 photocopies in one envelope).

(Note: Any submission of RFQ Proposal to be registered in our “Schedule of Tender RFQ Submission” i.e Name of Company and Contact Details, Name, Designation, IC Number, H/P Number, Email Signature, etc.

5.0 AKPK's OFFICER IN-CHARGE

a) **AKPK's Procurement officer-in-charge is:**

Name : Pn. Nur Hayati Mat Salleh/ En. Ezreen Ezairy Hussin

Contact No : 03-2610 5678/ 5696

Email : procurement@akpk.org.my

b) **AKPK's Technical officer-in-charge is:**

Name : En. Izzat Firdaus Ahmad

Contact No. : 03-2610 5601 / 019-3713077

Email : izzatfirdaus.a@akpk.org.my

6.0 DEADLINE OF SUBMISSION

- a) All quotations must reach us by / before **3:00 pm on 09 August 2019.**
- b) Tender received after the deadline and/or not comply with method of submission as above mentioned will be rejected.
- c) The vendor's proof of posting and/or submission by other means shall not be accepted as proof of receipt by AKPK.
- d) Document that are rejected or disqualified will be disposed-off at our end.
- e) Regardless of the method used for delivery, vendors shall be wholly responsible for the timely delivery of submitted proposal.

7.0 CLARIFICATION

Vendors may be invited to present and clarify on the RFQ on a date to be confirmed by both parties.

8.0 VALIDITY OF THE QUOTATION

- a) The validity of the quotation submitted is 180 calendar days;
- b) All costs and expenses incurred by vendor in any way associated with the development, preparation, and submission of responses, including but not limited to; the attendance at meetings, discussions, etc. and providing any additional information required by AKPK, will be borne entirely and exclusively by the vendor.
- c) All cost for internal audit services are inclusive of all other taxes, excluding out-of-pocket expenses.

APPENDIX A

A. SOLUTION PROPOSAL

1. CHECKLIST (TO HAVE THE FOLLOWING DOCUMENTS)

No	Description	Tick (✓)	Envelope
1.	Company Profile form		SOLUTION PROPOSAL
	Memorandum and Articles of Association		
	Corporate Information		
2.	Form D (Enterprise), Form 9 (Sendirian Berhad) & Form 8 (Berhad)		
	Form 49 (Sendirian Berhad & Berhad)		
	Latest Audited Financial Statements		
3.	Declaration of any relationship with AKPK Board members or Staff i.e. parents, spouse, children, siblings (if any)		

2. PERSON IN-CHARGE

Name:	
Designation:	
Contact Number (Off.):	
Mobile Number (H/P):	
Email:	
Signature:	
Date:	
Company Stamp	

B. COST PROPOSAL

1. CHECKLIST

No	Description	Tick (✓)	Envelope
1	Official Quotation (must submit this)		Cost Proposal
2	Cost Summary (as per item 2 below)		
3	Bank Info		

2. COST SUMMARY

No	Item Description	Total Amount (RM)
1.	Takaful/Insurance Contribution	
2.	Service Tax	
3.	Stamp Duty	
4.	Other (if any)	
	Grand Total Cost	

3. PAYMENT STRUCTURE

No.	Description	Payable (%)
1.	Preferred payment term - Upon delivery of deliverables	100%

4. BANK INFO/MANNER OF PAYMENT

Description	
(i)	Name of Bank :
(ii)	Address of Bank :
(iii)	Account number :
(iv)	Account type : Current / Saving
(v)	Account scheme : Conventional / Islamic

APPENDIX C

C. COMPANY PROFILE FORM

This section covers generic company information that will provide a quick overview of the service provider organization. Please fill in as much information as possible, and feel free to add additional information in the form of attachment.

i. Particulars of Company

No	Items	Details
1.	Company Name	
2.	Company Registration No. (for company registered in Malaysia)	
3.	Business Address	
4.	Correspondence Address (if different from the above business address)	
5.	Telephone No.	
6.	Fax No.	
7.	Contact Person(s)	
8.	Number of years in business operation	
9.	Latest Audited Financial Statements	
10.	SSM Certification (e.g. Form 49. Form 9, etc.)	

ii. Company's Directors (Please add more where required)

No.	Name of Directors	Position in Company	Period
1.			
2.			
3.			
4.			
5.			

iii. Company's Current and Past Work Experience (latest 3 projects)*

Please attach the list of similar contracts/projects performed by your company. **The list should be confined only to similar or related services described in this RFQ document** and presented in the format specified below (please add more rows if not sufficient).

No.	Client Name	Project Description	Completion Date
1.			
2.			
3.			

*Failure to provide suitable references may result in the service provider's proposal being rejected without further consideration.

D. DETAILED REQUIREMENT FOR DIRECTORS AND OFFICERS LIABILITY

NO.	ITEM	DESCRIPTION
1	Contract Period	3 Years (1 September 2019 – 31 August 2022)
2	Participant	Agensi Kaunseling Dan Pengurusan Kredit
3	Coverage	<ol style="list-style-type: none"> 1. Corporate liability cover <ul style="list-style-type: none"> • Corporate liability • Breach of contract • Crisis event 2. Employment practices liability cover 3. Professional liability cover <ul style="list-style-type: none"> • Defamation • Fraud/dishonesty retention • Loss of documents retention 4. Extensions <ul style="list-style-type: none"> • Covered person investigation costs • Not for profit entity investigation costs • Covered person regulatory crisis event costs • Corporate manslaughter and related public relations expenses – covered person • Bodily injury and property damage defence costs • Emergency costs • Civil fines and penalties • Extradition cost and related public relations expenses – covered person • Tax status costs • Public relations expenses • Court attendance 5. Retention <ul style="list-style-type: none"> • Retention for all Takaful covers and extensions

DECLARATION

We declare that all information on the company is true and correct; and there has been no deliberate suppression of facts, which are required in this form.

Signature _____

Name _____

Designation _____

Mobile Number _____

Email Address _____

Date _____

END OF RFQ