

RFP - ANNEXURE 1: EXPRESSION OF INTEREST

We, _____, are interested to be part of the RFP providers selection to submit an offer according to the RFP conditions and terms.

PROVIDER GENERAL INFORMATION

A. Company info:

- Name:
- Address:
- MOF number:
- Phone Numbers:
- Contact person's name:
- Contact person's email address:

B. Company History:

- Date of Establishment of the Insurance Company:
- Number of Years in the Insurance Business in Lebanon:

C. Finance of Insurance Company:

Finances (USD)	(AMOUNTS IN USD)
Paid up capital	
Total written premiums in 2023	
total claims, paid during 2023	
total outstanding claims as at December 31, 2023	

D. Legal and Financial Documentation

Kindly provide the following:

- Recent certificate issued from the Secretary of the Official Trade Registry
- Recent certificate issued from the Ministry of Economy & Commerce
- Updated signatory authorization
- Copy of the last three years audited financial statements

E. Reinsurers:

- List your treaty leader reinsurers' names, their rating, their shares
- Provide a recent certificate from your treaty leader reinsurers to confirm settlement of balances for 2023