



**City of O'Fallon**  
**Insurance Brokers Services**  
**Request for Proposals**

**CITY OF O'FALLON, MISSOURI**

**REQUEST FOR PROPOSALS**

**RFP NUMBER**

**INSURANCE BROKERAGE SERVICES**

**February 21, 2025**

INCLUDED ARE:

Proposal Instructions

Terms and Conditions

Scope of Services

Proposal Form

Worker Eligibility Verification Affidavit

**CITY OF O’FALLON, MISSOURI**

**PROPOSAL INSTRUCTIONS**

**PURPOSE**

The purpose of this Request for Proposals (RFP) is to obtain competitive proposals from qualified companies capable of providing services related to Insurance Broker and Consulting services specific to the Property/Casualty (including Workers Compensation) insurance program. The broker would be expected to begin providing services prior to the renewal of current policies. The RFP states the overall scope of services desired and specific functionality as well as required vendor qualifications.

This RFP provides prospective companies with sufficient information to enable them to prepare and submit proposals for consideration by the City of O’Fallon (hereafter referred to as “the City”) to satisfy the needs as outlined in the scope of services.

**BACKGROUND:**

The City of O’Fallon is a full-service city and provides general administrative services, police protection, streets, water and sewer, community development, parks and recreation, and environmental services. The City employs approximately 500 full-time employees and about 325 part-time and seasonal employees.

The City encompasses 30 square miles and services a population of approximately 94,000. O’Fallon is located in St. Charles County, Missouri, about 30 minutes west of the St. Louis City limits. The city is bisected in a north-south direction by Missouri State Highways M and K and in an east-west direction by Interstates 70 and 64. Regularly scheduled air passenger service is available at Lambert St. Louis International Airport located approximately 22 miles east of the City on Interstate 70.

The City of O’Fallon’s economic base is diverse and consists of a mix of residential, retail, manufacturing, financial services, governmental services, education and healthcare. Essentially a “bedroom community” in the early 1980’s to the St. Louis Metropolitan area, the City’s economic growth now supports approximately 50,000 jobs for our residents.

**SCHEDULE OF ACTIVITIES**

Release and advertisement of RFP:	February 21, 2025
Deadline for submission of questions:	March 13, 2025, at 12:00 P.M. CDT
Proposal submission deadline:	March 26, 2025, at 12:00 P.M. CDT

**PROPOSAL SUBMISSION**

Sealed proposals must be received by the City of O’Fallon, Missouri; Purchasing Office, 100 North Main Street; O’Fallon, Missouri 63366 prior to March 26, 2025, at 12:00 P.M. (prevailing central time). Each proposal shall consist of one original (identified as such) and 2 copies.

It is the responsibility of the proposer to ensure that their proposal is received in the Purchasing Office, prior to the deadline. Companies mailing proposals should allow ample mail delivery time to ensure timely receipt of their proposals. Proposals received after the deadline for receipt of proposals will not be opened or considered.

Proposals must be clearly identified as a proposal for the City of O’Fallon, Missouri “**RFP # 25-022 Insurance Brokerage Services**” and shall show such information on the outside of the proposal packet. Proposals will not be accepted by facsimile or email transmittal. **Do not staple or submit the proposal in any type of binder; binder clips are acceptable.**

**QUESTIONS**

All questions must be submitted in writing to Christine Grabin, Purchasing Agent, no later than 12:00 P.M. (CDT) on March 13, 2025, via email [CGrabin@ofallonmo.gov](mailto:CGrabin@ofallonmo.gov). The City will only respond by the end of day on March 18, 2025, to questions from Respondents. Answers to questions will only be distributed via addendum and posted on our website. [https://www.ofallonmo.gov/services/business\\_services/bid\\_opportunities.php](https://www.ofallonmo.gov/services/business_services/bid_opportunities.php)

## **AMENDMENTS TO RFP**

In the event it should be necessary to revise any portion of this RFP, addenda will be provided to all proposers who received the original RFP from the City of O'Fallon. This does not relieve the submitting company from the responsibility of regularly checking the City website listed below for updates regarding any addenda associated with this proposal request. Addenda are available on our website at: [https://www.ofallonmo.gov/services/business\\_services/bid\\_opportunities.php](https://www.ofallonmo.gov/services/business_services/bid_opportunities.php). If you received this RFP by means other than the bid system, you must furnish your company name, address, and telephone number to the Purchasing Agent identified in the Proposal Instructions section in order to receive any addendum to this RFP. Proposers shall acknowledge receipt of each addendum issued in the space provided on the RFP form.

END OF PROPOSAL INSTRUCTIONS

## CITY OF O'FALLON, MISSOURI

### TERMS AND CONDITIONS

#### **QUALIFICATIONS:**

All companies shall be licensed, insured, and bonded and shall furnish satisfactory evidence to the City that they have previously performed/provided the types of services as specified below.

#### **LAWS AND ORDINANCES, REGULATIONS, LICENSING FEES:**

Firm shall conform to all rules, regulations, ordinances, laws, or directives set forth by the City of O'Fallon and/or the State of Missouri.

#### **LAW GOVERNING:**

All State of Missouri and/or Federal Laws shall be hereby specifically made a part of this contract as set forth herein.

#### **NON-DISCRIMINATING:**

The Contractor, its employees, and subcontractors, agree not to commit unlawful discrimination and agree to comply with applicable provisions of the U.S. Civil Rights Act and Section 504 of the Federal Rehabilitation Act, and rules applicable to each.

Firm shall comply with Section 285.525 – 285.550 RSMo regarding enrollment in a federal work authorization program. **A signed, notarized affidavit (attached) and supporting documentation affirming enrollment in a federal work authorization program must be submitted with proposal. Failure to comply with this provision may result in rejection of proposal.**

#### **E-VERIFY:**

Company shall be E-Verify compliant and shall provide documentation to support this requirement within the proposal including the memorandum of understanding (MOU) and the electronic signature page completed in its entirety.

#### **METHOD OF AWARD / SELECTION:**

The proposals will be evaluated by the City. A response summary of proposals will be available by contacting Christine Grabin, Purchasing Agent. The response summary will only include the names of the companies that submitted proposals that were delivered by the required RFP submittal date and time. Until award of the contract, the Responses shall be held in confidence and shall not be available for public review.

#### **TERMS/CANCELLATION AND DAMAGES:**

This contract may be terminated by either or both parties upon thirty (30) days written notice or upon mutual agreement of both parties.

If the City, because of the Vendor's breach, terminates this Contract, the City shall have the right to purchase service elsewhere and to charge the Vendor with any additional cost incurred.

Notwithstanding the above, the Vendor shall not be relieved of any liability to the City for damages sustained by the City by virtue of any breach of this contract by the Vendor and the City may withhold any payments to the Vendor until such time as the amount of such damages due the City from the Vendor shall be determined.

## SCOPE OF SERVICES

### A. General:

The City is requesting proposals from qualified individuals and/or firms with experience evaluating municipal insurance exposures and ability to obtain quality and cost-effective insurance options for clients. Conduct a detailed survey of the City's insurance exposures to have the necessary knowledge to market the appropriate coverages to the insurance companies. The City is self-insured and the qualified firm must have experience in self-insured entities. The City currently contracts with Brentwood Services Administrators (BSAI) as our Claims Administrator and would continue in this relationship.

### B. General Scope of Work to be Performed:

The successful proposer will be expected to perform the following services as part of the broker agreement with the City on an annual basis.

- Submit a marketing report, including all quotes requested and received along with corresponding analysis and recommendations.
- Place the insurance coverages including the preparation of the specifications and applications.
- Prepare an annual Summary of Insurance which includes a detailed schedule of insurance, premiums, loss history and any recommendations regarding the insurance program.
- Provide trended values for property insurance policies.
- Issue all Certificates of Insurance required by the City. Maintain a list of certificate holders so that annual reviews will include a new issuance of certificates.
- Be available to attend council meetings or other meetings when the firm's presence is desired.
- Be available to meet with City personnel in order to discuss insurance issues and concerns regarding the insurance program.
- Service existing insurance policies by reviewing coverage issues, reporting values, processing policy changes, etc. in a timely manner.
- Schedule quarterly meetings to discuss loss control issues, exposure changes and general administrative matters.
- Provide Loss Prevention/Safety Consulting services.
- Cooperate fully with the City's attorneys on any issues regarding claims, coverage or other legal issues involving the insurance program.
- Assist the City with claims with insurance companies or possibly third-party administrators.
- Review insurance and indemnity clauses of City and vendor contracts.
- Assist the City with the development and implementation of ongoing educational and training programs.
- Assist the City with any cost containment programs.
- Assist the City in establishing and maintaining proper liaisons among the City of O'Fallon and insurance companies.
- Assist the City with annual worker's compensation reporting requirements, including providing training on reporting as a self-insured entity.
- Review the reporting and payment process for worker's compensation as a self-insured entity and provide guidance on how to improve the process while maintaining standards required by the State.
- Review loss history data in order to better forecast losses and identify loss trends.
- Work alongside City staff to maintain a log of basket aggregate expenditures and keep City apprised of costs associated with said expenditures.
- Continue to evaluate the overall risk management program for the City.
- Have the ability to partner with BSAI as our claims administrator and assist with the annual renewal process of said claims administrator; or assist with the RFP process as necessary.

### C. Broker Compensation:

The City requests that the selected Broker be compensated on an annual fee basis. All insurance policies will be written net (0% commission) with retail commissions eliminated.

If the firm uses a wholesaler for the placement of a particular line of insurance then that wholesaler may be paid usual and customary wholesale commission. The Broker will make every attempt to disclose the wholesale commissions and any other additional policy fees to the City.

The Broker may not accept contingent commissions on any insurance placement without the prior consent of the City and with full upfront disclosure of all arrangements.

Please provide your firm's annual fee for providing all requested services in this RFP. Please list the annual fee for each year starting July 1, 2025:

First Year Fee \_\_\_\_\_  
Second Year Fee \_\_\_\_\_  
Third Year Fee \_\_\_\_\_  
Fourth Year Fee \_\_\_\_\_  
Fifth Year Fee \_\_\_\_\_

The City also requests that each Proposer describe any other services they feel would be beneficial for the City to consider which might be outside the scope of this RFP. Please also provide an approximate cost for these services.

**D. Proposal Requirements:**

- All proposals must address the following areas:
  1. A detailed statement of the firm's qualifications and experience in consulting with respect to the scope of work.
  2. A list of principal(s) assigned to the City together with a statement of their expertise as demonstrated by direct experience in municipal insurance services. The expertise of each principal must be clearly presented; it is recommended that resumes be included.
  3. A statement on how the firm will provide services and address the scope of services/work contained herein. Provide a draft timeline to complete the deliverables listed above in "C. General Scope of Work to be Performed" and include a description of the firm's ability to provide timely completion of the project for the City.
  4. Written disclosure of any potential conflicts of interest.
  5. Completion/inclusion of the Supplemental Information form, Proposal Form, and Worker Eligibility Verification Affidavit, along with any additional relevant supplementary information or material.

END OF SCOPE OF SERVICES

**Supplemental Information (use additional sheets as necessary):**

1. Name of primary contact, address and phone number.

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2. What day(s) and time(s) is the primary contact available?

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3. Describe any name or ownership changes in the past five (5) years.

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4. Submit a sample copy of a current contract/agreement with all terms and conditions (subject to review by the City's legal review).

5. Provide at least five (5) references of current or past clients for which insurance services have been provided. Include the following information for each reference:

- Agency/firm name
- Address, city, state, zip
- Contact information
- Population

**Evaluation Criteria:**

The City reserves the right to select the Vendor who best meets the "overall" needs of the City of O'Fallon based primarily on the following criteria (not listed in any order of importance):

1. Qualifications (Expertise and Experience)
  - The firm's past experience and performance on comparable engagements
  - The quality of the firm's professional personnel to be assigned to the engagement
2. Approach to Insurance Services
3. References and track record for successful engagements, including timeliness
4. Fees
5. Adherence to the requested information specifications, thoroughness of the proposal, as well as the overall format of the presentation

END OF SUPPLEMENTAL INFORMATION

**CITY OF O'FALLON, MISSOURI**

**PROPOSAL FORM**

Signature of proposer indicates that the proposer understands and will comply with all terms and conditions and all other specifications made a part of this Request for Proposals and any subsequent award or contract. All terms, conditions and representations made in this invitation will become an integral part of the contract.

In compliance with this Request for Proposal Number 25-022 and to all the conditions imposed herein, the undersigned offers and agrees to provide Insurance Brokerage services for the City of O'Fallon in accordance with the scope of services and intent of the request for proposals contained herein.

Proposal Form shall be attached to respondent's proposal.

Indicate whether: ( ) Individual; ( ) Partnership; ( ) Corporation

Incorporated in the state of: \_\_\_\_\_

COMPANY: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ NAME: \_\_\_\_\_

CITY: \_\_\_\_\_ TITLE: \_\_\_\_\_

STATE/ZIP: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

TAX ID NO.: \_\_\_\_\_ DATE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**Acknowledge the receipt of addenda by initialing box below as appropriate.**

**Addenda 1 \_\_\_\_\_ Addenda 2 \_\_\_\_\_ Addenda 3 \_\_\_\_\_ Addenda 4 \_\_\_\_\_**

**WORKER ELIGIBILITY VERIFICATION AFFIDAVIT**

STATE OF \_\_\_\_\_ )  
 ) ss  
COUNTY OF \_\_\_\_\_ )

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me appeared \_\_\_\_\_,  
Affiant name

personally known to me or proved to me on the basis of satisfactory evidence to be a person whose name is subscribed to this affidavit, who being by me duly sworn, stated as follows:

• I, the Affiant, am of sound mind, capable of making this affidavit, and personally certify the facts herein stated, as required by Section 285.530, RSMo, to enter into any contract agreement with the City to perform any job, task, employment, labor, personal services, or any other activity for which compensation is provided, expected, or due, including but not limited to all activities conducted by business entities.

• I, the Affiant, am the \_\_\_\_\_ of \_\_\_\_\_, and I am duly  
title business name

authorized, directed, and/or empowered to act officially and properly on behalf of this business entity.

• I, the Affiant, hereby affirm and warrant that the aforementioned business entity is enrolled in a federal work authorization program operated by the United States Department of Homeland Security, and the aforementioned business entity shall participate in said program to verify the employment eligibility of newly hired employees working in connection with any services contracted by the City of O’Fallon. I have attached documentation to this affidavit to evidence enrollment/participation by the aforementioned business entity in a federal work authorization program, as required by Section 285.530, RSMo.

• I, the Affiant, also hereby affirm and warrant that the aforementioned business entity does not and shall not knowingly employ, in connection with any services contracted by the City, any alien who does not have the legal right or authorization under federal law to work in the United States, as defined in 8 U.S.C. § 1324a(h)(3).

• I, the Affiant, am aware and recognize that, unless certain contract and affidavit conditions are satisfied pursuant to Section 285.530, RSMo, the aforementioned business entity may be held liable under Sections 285.525 through 285.550, RSMo, for subcontractors that knowingly employ or continue to employ any unauthorized alien to work within the state of Missouri.

• I, the Affiant, acknowledge that I am signing this affidavit as a free act and deed of the aforementioned business entity and not under duress.

\_\_\_\_\_  
Affiant Signature

Subscribed and sworn to before me in \_\_\_\_\_, \_\_\_\_\_, the day and year first above-written.  
city (or county) state

My commission expires: \_\_\_\_\_ Notary Public

*[Attach documentation of enrollment/participation in a federal work authorization program]*