



**नेपाल पुनर्बीमा कम्पनी लिमिटेड**

(नेपाल सरकारको स्वामित्वमा स्थापित)

**Nepal Reinsurance Co.Ltd. (Nepal Re.)**

(An undertaking of Nepal Government)

नेपाल बीमा प्राधिकरणबाट इजाजत प्राप्त

थापाथली, काठमाडौं, नेपाल

फोन नं. ०१-५५७०४०९, ५५७०४०२

ईमेल: nepalre@ntc.net.np

वेबसाइट: www.nepalre.com.np

## Expression of Interest (EOI)

### (For listing of Reinsurance Brokers)

**(First Date of Publication: 23rd April 2024)**

Nepal Reinsurance Company Limited, a leading Reinsurance Company in Nepal, invites application from all reinsurance brokers for all of its retrocession program for 2024-25. The interested and eligible domestic and international broker firm/company with easy access in international (Life/General) reinsurance market may submit EOI along with the required document within 45 days from the date of the first publication of this notice pursuant to Section 14(4) of Public Procurement Act, 2006.

#### **A. The EOI application should enclose following documents:**

1. Certificate of Incorporation and/ or renewal.
  2. Updated Certificate of Broker License issued by the concerned regulatory authority.
  3. Updated valid Professional Indemnity Policy covering Nepal.
  4. Latest Financial Statement certified by practicing Professional Accountant.
  5. Company Profile (as per the prescribed format)
  6. Duly Signed Self Declaration letter for any regulatory action taken to the broking firm/company in last 3 years.
- B. Interested / eligible Reinsurance Broker Firm/Company may obtain further information and EOI document free of cost from company website or from Nepal Reinsurance Company Limited, LS Building, Thapathali, Kathmandu, Nepal.
- C. Please submit your sealed Expression of Interest (EOI) physically at office address (LS Building – 3rd Floor, Thapathali, Kathmandu, Nepal) or electronically (email) at nepalre@ntc.net.np within 45 days of published date of EOI.
- D. The deadline for the submission of the EOI is 6th June 2024 (End of Day, Nepalese Standard Time).
- E. In case the last date of obtaining and submission of the EOI documents happens to be a public holiday, the next working day will be deemed as the due date but the time will be the same as stipulated.
- F. After assessment of EOIs, only shortlisted eligible reinsurance broker companies will be listed as Nepal Re's reinsurance brokers for 2024-25.
- G. The form mentioned in A(5) can be downloaded from <https://nepalre.com.np/>.
- H. Nepal Reinsurance Company Limited reserves full right to select/reject any broker and no further enquiries on non-selection shall be entertained.



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## Brokers Profile Information

Introduction and Background Information		
A	Name of Company	
B	Date of Establishment	
C	Address	
D	Regulatory Information	1. Name of the Regulator:..... 2. Any punishment from regulator in last consecutive Three year: .....
E	Profile of Key Person with Designation	1. .... 2. .... 3. .... 4. ....
F	Contact Person (For Listing related follow-up)	Name: Contact No.: Email Address:
G	Total Number of Staff	
H	Size of Business (Annual Turnover)	
I	Interest in Business through this EOI	1. Life Reinsurance 2. General Reinsurance 3. Both
Business Coverage		
A	Countries Served (Name)	
B	Major Portfolio Dealt with	
C	Other Services	1. Specialized Services: 2. Allied Services:
D	Total Branch Offices (Reinsurance Broking) with Country Location	



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<b>Experience in South Asia</b>		
A	Countries Served (Name)	
B	Insurance and Reinsurance Served with Rating (Above B+/BB)	
C	Total Business Volume in South Asia	
<b>Business Relationship with Nepal Re.</b>		
A	Year from When Business Started in Nepal	
B	Year from When Business Relationship Started with Nepal Reinsurance Company Limited	
C	Total Business Provided to Nepal Re (Last 3 Years)- GPI	2023-24: 2022-23: 2021-22:
D	Total Business Accepted from Nepal Re (Last 3 Years) - GPI	2023-24: 2022-23: 2021-22:

- I / We declare that all information furnished above is correct in my/our knowledge and belief.
- I / We understand that after submitting this application, if it is proved that the information submitted is wrong or incorrect at any point of time, I / We shall be subjected to the provisions of the extant Acts, Regulations, Guidelines and circulars notified.

Stamp/Seal of the Company

Signature :  
Name :  
Designation :  
Date :  
Place :