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MATSYAFED KERALA STATE CO-OPERATIVE FEDERATION FOR FISHERIES DEVELOPMENT LIMITED NO. F (T) 738 (MATSYAFED) Kamaleswaram, Manacaud P.O., Thiruvananthapuram - 695009

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No.Mfed/P2/FGPAIS/6654/2020-21

23/12/2019

QUOTATION NOTICE

Sub:-Matsyafed- Fishermen Group Personal Accident Insurance Scheme - 2020-21.

Sealed competitive quotations/offers are invited from the IRDA approved Insurance Companies for providing **Group Personal Accident Insurance cover** to the members of Primary Fishermen cooperative Societies affiliated to Matsyafed, with the following terms and conditions.

- A. Insurance coverage is required for the following cases due to accident.
 - 1. Death due to accident.
 - 2. Loss of both limbs/ Eyes
 - 3. Loss of one limb/one eye
 - 4 .Permanent total disability /Partial disability
 - 5. Hospitalization expense due to accident. (20% maximum per member during the year)

B. Period of insurance

One year from 1/04/2020 to 31/03/2021.

C. Insurance Compensation-

- 1. Not less than Rs.1000000/-(Rupees Ten Lakh only) for accidental death/ Permanent total disability.
- 2. Suitable compensation not less than Rs 500000/- for partial loss/ disability depending on extent of loss /disability and hospitalization expenses.
- D. Expected enrolment is more than 100000 members; may go up to 150000.
- E. Matsyafed will collect and remit the premium to the insurer through primary Fishermen Development Welfare Cooperative Societies. However the insurer should supply required number of application forms, notices, brochures, posters etc for enrolment and publicity.
- F. Fishermen, SHG Members and Employees of Matsyafed and Societies will be enrolled in the scheme. Primary eligibility for claim should be the enrollment by Matsyafed only.

Offers specifying all details shall reach the undersigned in sealed super scribed cover "Offer for *Matsyafed Fishermen Group Personal Accident Insurance Scheme 2020-21*" latest by **3pm on** 7/01/2020. The offers will be opened by the undersigned or by an officer authorized by him on the same day at **3.30 PM** in the presence of the quotationers who are present. The undersigned reserves the right to accept or reject any or all the quotations without assigning any reasons.

MANAGING DIRECTOR

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