CITY	OF						
	W	A	S	Ι	L	L	A
			• /	٩L	ASI	ζA	•

Council Action:				
Approved:	Denied: □			
Date of Action: 5/13/19				
Verified by:				

## CITY COUNCIL ACTION MEMORANDUM

**AM No. 19-18:** Award Of A Three (3) Year Contract To Combs Insurance Agency, Inc. In The Amount Of \$141,000 For Insurance Brokerage Services.

Originator:

April Dwyer, Purchasing

Date:

4/30/2019

Agenda of:

5/13/2019

Route to:	Department Head	Signature	Date
X	Chief of Police	Xelle Delgen	9/2/19
X	Public Works Director		5/2/19
X	Recreation Services Director	An Flaguish	5-2-19
X	Finance Director	Mount fills	573119
X	Deputy Administrator	Malan	- 5/2/9
X	City Clerk	Samuel	572/19

Reviewed by Mayor Bert L. Cottle:

Fiscal Impact:  $\boxtimes$  yes or  $\square$  no

Funds Available: ⊠yes or □ no

Account name/number/amount:

Purchased Services – Insurance XXX-XXXX-50-20 (Multiple Accounts) \$141,000

**Attachments**: Combs Cost Proposal (1 page)

**Summary Statement:** On March 1, 2019 the City of Wasilla issued a Request for Proposal (RFP) 0301-0-2019/AD for Insurance Brokerage Services. Two proposals were submitted; from Marsh & McLennan Agency, LLC and from Combs Insurance Agency, Inc. (Combs). The evaluation committee reviewed and scored the proposals. Combs provided the highest-ranked responsive proposal.

This contract will begin on July 1, 2019 and end on June 30, 2022 with two (2) optional one (1) year renewals.

**Staff Recommendation:** Award Of A Three (3) Year Contract To Combs Insurance Agency, Inc. In The Amount Of \$141,000 For Insurance Brokerage Services.

## Attachment E - Cost

The Broker's compensation shall be a flat fee or percentage of coverage premiums. The structure of the fee and the method of payment of the fee must be included in the proposal, provided no more than one-third of the total contract fee during each year of the three-year agreement. All insurance policies will be placed net of commission or fees payable to the Broker. Indicate if your fee structure is fixed or are you willing to negotiate fees for an account.

The cost proposal will be submitted in a clearly marked and sealed envelope separate from the technical proposal. Failure to package this proposal separately could result in the proposal being deemed non-responsive. The cost proposal shall have a transmittal page including: name, address and contact information, listing of any applicable fees that are not expressly listed below. This transmittal page and cost proposal shall be signed by an authorized representative.

TYPE OF COVERAGE	COST		
Property, Liability, Workers Compensation, Automobiles, and Airport	\$ 45,000.00		
Employee Benefits	\$_2,000.00		
TOTAL ANNUAL FEE	\$_47,000.00		

Combs Insurance Agency, Inc.

Company Name

Michael F. Combs, President

Name (printed)

Title

04/12/2019

Signature

Date