

Selection Of TPA for Servicing of AB-PMJAY

Appendix C

(On the Letter-head of the Bidders)

Date:

To

The Oriental Insurance Company Limited,

RO- Ahmedabad, 3rd Floor,

Navjivan Trust Building,

B/H Gujarat Vidhyapith,

Near Ashram Road, Ahmedabad.

Sub: Providing Health Services by TPA for Implementation of AB-PMJAY Yojana

Sir/Madam,

Being duly authorized to represent and act on behalf of (hereinafter referred to as "the Bidder"), and having reviewed and fully understood all of the Proposal requirements and information provided and collected, the undersigned hereby submits the Proposal on behalf of (Name of Bidder) for the Project, with the details as per the requirements of the RFP, for your evaluation.

We confirm that our Proposal is valid for a period of six calendar months from (insert Proposal Due Date).

Yours faithfully,

For and on behalf of (Name of Bidder)
Duly signed by the Authorised Signatory of the Bidder