STATE LIFE
INSURANCE CORPORATION OF PAKISTAN

Pre-Qualification of Advertising Agencies for the years 2026-28

Annexure I

Letter of Application

To:
Divisional Head (CAD)
State Life Insurance Corporation of Pakistan,
Principal Office, Dr. Ziauddin Ahmed Road, Karachi.
Tel: 021-/ 021-

Respected Madam,

Being duly authorized to represent and act on behalf of ..... (hereinafter "the Agency") and having reviewed and fully understood all the prequalification information provided, the undersigned hereby apply to be prequalified as Agency for providing Advertising Services to SLIC.

Attached to this letter are Attested True Copies (of original documents) as required as per Evaluation Criteria.

SLIC and its authorized representatives are hereby authorized to conduct any inquiries or investigations to verify the statements, documents, and information submitted in connection with this application, and to seek clarification from our bankers and clients regarding any financial and technical aspects.

This Letter of Application will also serve as authorization to any individual or authorized representative of any institution referred to in the supporting information, to provide such information deemed necessary and requested by yourselves or the authorized representative to verify statements and information provided in this application, or with regard to the resources, experience, and competence of the Agency.

This application is made with the full understanding that:

a. Documents by Prequalified Agencies will be subject to verification of all information submitted for prequalification at the time of document;

b. SLIC reserves the right to:
   (i) Amend the scope of this project; in such event Document will only be called from Prequalified Agencies who meet the revised requirements; and
   (ii) Cancel the Prequalification process and reject applications in accordance with Public Procurement Rules.

We confirm that in the event that we are Prequalified, that Prequalification as well as any resulting engagement will be:

a. Signed, so as to legally binding on all parties; and
b. The undersigned declare that the statements made and the information provided in the duly completed Prequalification Document are complete, true and correct in every detail.

Name & Designation
For and on behalf of
(Name of Agency)
Agency Stamp to be affixed

Contact Information

In case of any query related to this Prequalification document, Agency may contact the following SLIC representative:

Name: _____

Position: _____

E-Mail: _____

Phone: 021-_____