**REQUEST FOR INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **RFI DETAILS** | | | |
| **[INSERT AGENCY NAME]** has been identified as a potential agency partner based upon your industry achievements. We would like to extend an invitation for your consideration of our Request for Proposal process.  **[INSERT ADDITIONAL TERM DETAILS]** | | | |
| **BUDGET** | The annual budget for services provided is estimated at **[$000,000]** annually. | **DEADLINE** | Requested information must be received by **[TIME AND DATE].** |
| **QUESTIONS** | Inquiries may be submitted to **[EMAIL ADDRESS]** with the subject line **[CREATIVE AGENCY RFI INQUIRY]** by **[DATE].** | **SUBMISSION** | Please forward requested information to **[EMAIL ADDRESS]** with the subject line **[CREATIVE AGENCY RFI SUBMISSION].** |

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# BACKGROUND

## COMPANY OVERVIEW

Provide Response

## THE OPPORTUNITY

Provide Response

## PURPOSE OF REQUEST FOR INFORMATION

Provide Response

# SUBMISSION PROCESS

## TIMELINE

|  |
| --- |
| RFI issue date: |
| Supplier briefing / site visit date (if applicable): |
| RFI submission closing date and time: |

## POINT OF CONTACT

Please direct any inquiries regarding this opportunity and the RFI process to:

|  |
| --- |
| Name: |
| Title / position / department: |
| Phone 1: |
| Phone 2: |
| Fax: |
| Email: |
| Mailing address: |

## RESPONSE SUBMISSION METHOD

Provide Response

## LATE RESPONSES

Provide Response

## RESPONSE SUBMISSION COSTS

There is no fee associated with the RFI submission. However, any costs incurred relating to the submission process are the sole responsibility of the party supplying the response.

## CONFIDENTIALITY

Provide Response

## ACCEPTANCE OF CONDITIONS

By the act of submitting a response to this RFI, suppliers are deemed to have acknowledged and agreed to the conditions set forth in this Request for Information.

# INFORMATION REQUESTED

## SUPPLIER INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| **AGENCY NAME** |  | **CONTACT NAME** |  |
| **ADDRESS** |  | **CONTACT TITLE** |  |
|  | **PHONE** |  |
|  | **EMAIL** |  |
|  | **WEBSITE** |  |

## SUPPLIER BACKGROUND

|  |  |
| --- | --- |
| **AGENCY HISTORY OF OWNERSHIP AND AFFILIATIONS** |  |
| **OFFICE LOCATIONS** |  |
| **BRIEF STATEMENT OF CORE BUSINESS COMPETENCIES** |  |
| **SPECIAL REQUIREMENTS** |  |

## FINANCIAL INFORMATION OF PUBLISHED ACCOUNTS

|  |  |  |  |
| --- | --- | --- | --- |
| **Turnover** | | **Operating profit** | |
| **Year 20--** |  | **Year 20-** |  |
| **Year 20--** |  | **Year 20-** |  |
| **Year 20--** |  | **Year 20-** |  |
| **Additional account info** |  | | |
| **In the case that above requested information cannot be provided, please give other indication of agency financial health.** | |  | |
| **Receipt of payment practices** |  | | |

## CAPABILITIES AND EXPERIENCE

|  |  |
| --- | --- |
| **Capabilities** |  |
| **Experience** |  |
| **Why we're a good fit; 150 words or less** |  |

## PROPOSED ACCOUNT TEAM OVERVIEW

Divulge information only with employee’s expressed consent.

|  |  |
| --- | --- |
| **Bio 1** |  |
| **Bio 2** |  |
| **Bio 3** |  |
| **Bio 4** |  |
| **Bio 5** |  |
| **Bio 6** |  |
| **Do you subcontract work to third parties?** | If "yes," explain: |
|
|
| Yes / no |

## CERTIFICATIONS / AWARDS / TRADE ORGANIZATIONS / INSURANCE / POLICIES

|  |  |  |  |
| --- | --- | --- | --- |
| **Certifications and awards** |  | | |
| **Trade organization memberships** |  | | |
| **Confirmation of financial cap per claim of agency's professional indemnity insurance** | |  | |
| **Are the following policies held by your agency?** | | | |
| Yes / no | Quality management | Yes / no | Training |
| Yes / no | Disaster recovery | Yes / no | Health and safety |
| Yes / no | Equality and diversity | Yes / no | Environmental |
| Yes / no | Social and corporate responsibility | Yes / no | Other |
| Yes / no | Other | Yes / no | Other |
| Yes / no | Other | Yes / no | Other |

## ESTIMATED COSTS / FEES

|  |  |  |
| --- | --- | --- |
| **Estimate** | | **Additional comments** |
| **Initial fees** | $ |  |
| **Recurring fees** | $ |
| **Assumptions** | $ |
| **Pricing methodology** |  | |

## ADDITIONAL INFORMATION

Detail any further information believed to be beneficial to the requesting party in support of this Request for Information review process.

## ATTACHMENTS

List any supporting attached documentation or provided electronic links.