# ATTACHMENT D Vendor Questionnaire

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| Question | Vendor Response |
| **General Vendor Information** |  |
| Company Name |  |
| Address 1 |  |
| Address 2 |  |
| City |  |
| State |  |
| Postal/Zip Code |  |
| Country |  |
| Phone |  |
| Fax |  |
| Website |  |
| **Contact Information** |  |
| Primary Contact Person (Executive Leadership) |  |
| Position Title |  |
| Phone Number (Please include Country Code + City Code) |  |
| Fax Number (Please include Country Code + City Code) |  |
| Email Address |  |
| Secondary Contact Person (Day-To-Day Project Coordinator) |  |
| Position Title |  |
| Phone Number |  |
| Fax Number |  |
| Email Address |  |
| Transition Resource |  |
| Position Title |  |
| Phone Number |  |
| Fax Number |  |
| Email Address |  |

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| **Company Information** |  |
| Federal ID No. |  |
| Legal Entity Type (i.e., Corporation, Partnership, Sole Proprietor or other). |  |
| If a corporation, provide your state/country of incorporation. |  |
| How many years has your company been in business under your current name? Please specify dates of any prior names. |  |
| Describe the legal structure of your company, including parent and subsidiaries. |  |
| List your locations and number of employees per location. |  |
| **Company Stability** |  |
| Have you, your parent or any subsidiaries filed for bankruptcy in the past five years? |  |
| Indicate whether your company had any investigatory or regulatory action taken against you. |  |
| Are you in the process of an acquisition or merger? |  |
| **Product History** |  |
| Are you a software development firm or an integrator? |  |
| How many years have you offered COTS software products? |  |
| How many years has your firm provided claims management solutions to the property and casualty insurance industry? |  |
| How many years has your firm provided policy administration solutions to the property and casualty insurance industry? |  |
| List all current products, including any previous names for current products. |  |
| What is your current software install base by number of clients, product and version? |  |
| Do you have any offerings specific to Guarantee Funds? |  |
| **Product Development Investment** |  |
| Please state the percentage of revenues invested in product development/research and development for the past three years. |  |
| Provide a version history of software upgrades for your current products for at least three years. Indicate which versions were support upgrades versus paid upgrades. |  |
| **Product Support** |  |
| What is your support structure for post-production clients? |  |
| What is your warranty period? |  |
| Describe the help desk, account management and other support you provide to your customers. |  |
| What is your support policy for software versions (e.g. current -2, etc.). |  |
| Do you hold periodic trainings for users? Where and when? |  |
| What are the hours of your help desk / support staff? |  |
| How are product upgrades deployed? How are upgrades with customized software handled? |  |
| How do you receive customer feedback? |  |