



**The Andhra Pradesh  
State Cooperative Bank Ltd.**  
(A State Partnered Scheduled Bank)



BOD/BRCC/F.42/2024-25

Date: 29-03-2025

**NOTIFICATION**

**Sealed quotations are invited for Renewal of Group Accident Personal Insurance Policy (Unnamed) for a period of one year i.e., from 00:00 hours of 26.04.2025 to midnight of 25.04.2026.**

We are to inform that our Group Accident Personal Insurance Policy (Unnamed) is due for renewal with effective from 00:00 hours of 26.04.2025 to 11:59:59 PM of 25.04.2026. In this connection, we request you to furnish the quotations for the following policy.

Group Accident Personal Insurance Policy (Unnamed) for an amount of Rs.47.00 lakh (Rupees Forty-Seven Lakh only) for one year, with effective from 00:00 hours of 26.04.2025 to 11:59:59 PM of 25.04.2026, to cover the risks during transit of cash in respect of the following personnel:

<b>Cadre</b>	<b>No. of Persons</b>	<b>Proposed Sum Insured per person (Rs. in lakh)</b>
Manager /Staff Asst. / Cashier	1	17.00
Sub Staff	1	9.00
Driver	1	9.00
Armed Guard	2	12.00
<b>Total</b>	<b>5</b>	<b>47.00</b>

The Bank reserves the right to negotiate, and the decision of the Bank will be final in the matter. Choice to be given to the Bank in choosing TPA.

Please send the quotations in a sealed cover superscribed to "Quotations for Group Accident Personal Insurance Policy (Unnamed)" to reach this office on or before 11<sup>th</sup> April, 2025 by 5:00 P.M, addressed to

The Deputy General Manager (BOD/BRCC)  
The Andhra Pradesh State Co-operative Bank Ltd.,  
#27-29-28, NTR Sahakara Bhavan,  
Help Hospital Road,  
Governorpet,  
Vijayawada – 520002.

**B RAMBABU NAYAK**

**DEPUTY GENERAL MANAGER**  
**DEPUTY GENERAL MANGER-II-AGC67**