**CREATIVE AGENCY RFI TEMPLATE**

**Company Name**

**COMPANY LOGO**

**R E Q U E S T F O R I N F O R M A T I O N**

**00/00/0000**

|  |
| --- |
| **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 subject line [CREATIVE AGENCY RFI INQUIRY] by [DATE] | **SUBMISSION** | Please forward requested information to [EMAIL ADDRESS] with subject line [CREATIVE AGENCY RFI SUBMISSION] |

|  |
| --- |
| **SUBMISSION FORM** |
|  |  |  |  |
| **AGENCY NAME** |   | **CONTACT NAME** |   |
| **ADDRESS** |   | **CONTACT TITLE** |   |
|   | **PHONE** |   |
|   | **EMAIL** |   |
|   | **WEBSITE** |   |
|  |  |  |  |
| **AGENCY BACKGROUND** |
| **AGENCY HISTORY OF OWNERSHIP AND AFFILIATIONS** |   |
| **OFFICE LOCATIONS** |   |
| **BRIEF STATEMENT OF CORE BUSINESS COMPETENCIES** |   |
| **SPECIAL REQUIREMENTS** |   |
|  |  |  |  |
| **CLIENTS SERVED IN SIMILAR INDUSTRY** | **POTENTIAL CONFLICTS / COMPETITOR CONTRACTS** |
|   | YES / NO |
|   | **LIST ANY COMPETITOR CLIENTS** |
|   |   |
|   |   |
|   |   |

|  |
| --- |
| **INTENTIONS / OBJECTIVES / SUCCESS STORIES / GOOD FIT** |
| **INTENTION 1** |   |
| **INTENTION 2** |   |
| **INTENTION 3** |   |
| **OBJECTIVE 1** |   |
| **OBJECTIVE 2** |   |
| **OBJECTIVE 3** |   |
| **SUCCESS 1** |   |
| **SUCCESS 2** |   |
| **SUCCESS 3** |   |
| **WHY WE'RE A GOOD FIT; 150 WORDS OR LESS** |   |

|  |
| --- |
| **PROPOSED ACCOUNT TEAM BRIEF BIOGRAPHIES*Divulge only information 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 |

|  |
| --- |
| **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** |   |

|  |
| --- |
| **TRADE ORGANIZATIONS / INSURANCE / POLICIES** |
| **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 |