ANNEXURE - B

Undertaking of the Bidder

(On the letter head of Insurer)

| To |
|---|
| FA& CAO, |
| Cochin Port Trust, |
| |
| This is to certify that Mr(Name, Designation and Office address) has been |
| authorized to sign all documents pertaining to your Tender No dated |
| We confirm that we have understood the requirements and we also confirm that we fully agree to all |
| the terms of parameters of insurance cover. Our Policy wordings will fully comply with all the stated |
| requirements of tender and there will be no condition in the insurance policy contrary to the tender |
| terms &/or parameters of cover and in any way dilute the said requirements of cover. |
| |
| Yours faithfully |
| Signature |
| (Name:) |
| Designation: |
| Deter |
| Date: |
| Office Seal |
| |