



## REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake Small Value Procurement as Alternative Modes of Procurement for official use of PSA Catanduanes with the following details:

<b>Name of Project</b>	Procurement of Catering Services for the conduct of 2024 Census of Population (POPCEN) and Community Based Monitoring System (CBMS) Provincial Level Training on 17-22 June 2024.
<b>Solicitation</b>	2024-06-058-CT
<b>Location</b>	PSA Catanduanes Provincial Statistical Office
<b>Brief Description</b>	(See Bid Form, <i>Page 2</i> )
<b>Quantity</b>	(See Bid Form, <i>Page 2</i> )
<b>Approved Budget for the Contract (ABC)</b>	Php 93,960.00
<b>Contract Duration</b>	June 17-22, 2024

Please quote your **Lowest Price** on the item/s listed below and submit your **SEALED QUOTATION** not later than **10:00 am on June 11, 2024** at **PSA Catanduanes PSO, BL Jastrid Bldg., Cavinitan, Virac, Catanduanes.**

  
**CECILLE A. BRIONES**  
RBAC Chairman

### Terms and Conditions:

1. Only the suppliers registered at the Philippine Government Electronic Procurement System (PhilGEPS) shall be allowed to submit the quotation.
2. Supplier must be an authorized re-seller of original equipment manufacturer.
3. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
4. Late submission of quotation shall not be accepted.
5. Bids exceeding the ABC shall be disqualified.
6. The lowest bidder shall be informed immediately and shall be asked to submit the following requirements within three days after the opening of bids or during post qualification:
  1. Mayor's/Business Permit
  2. PhilGEPS Registration Number
  3. Omnibus Sworn Statement
7. Award of contract shall be made to the lowest quotation, and complies with the specifications and other terms and conditions as stated in the RFQ.
8. Terms of Payment shall be made through check payable to the supplier.
9. The PSA reserves the right to reject any or all bid proposals, or declares the bidding a failure, or not to award the contract, and makes no assurance that a contract shall be entered into as a result of this invitation.

BID FORM

Item/s and Specification/s (Minimum)	Unit	Qty	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check)	
					YES	NO
<i>Procurement of Catering Services for the conduct of 2024 Census of Population (POPCEN) and Community Based Monitoring System (CBMS) Provincial Level Training on 17-22 June 2024.</i>						
<i>June 17, 2024 (AM/PM Snacks and Lunch)</i>	lot	29	P _____	P _____	( )	( )
<i>June 18, 2024 (AM/PM Snacks and Lunch)</i>	lot	29	P _____	P _____	( )	( )
<i>June 19, 2024 (AM/PM Snacks and Lunch)</i>	lot	29	P _____	P _____	( )	( )
<i>June 20, 2024 (AM/PM Snacks and Lunch)</i>	lot	29	P _____	P _____	( )	( )
<i>June 21, 2024 (AM/PM Snacks and Lunch)</i>	lot	29	P _____	P _____	( )	( )
<i>June 22, 2024 (AM/PM Snacks and Lunch)</i>	lot	29	P _____	P _____	( )	( )
			<b>Total</b>			
xxxxxx				Total amount in words:		
For official use of PSA-Catanduanes				_____		
NOTE: With free tarpaulin (lay-out will be provided by the office)				_____		
				_____		
				_____		
<i>Proposal shall be in accordance with the Scope of work and technical specifications (making use of the following criteria: availability and quality of venue, location and site condition, neighborhood data, quality of food and facilities, and cost) as prescribed underf "H", Appendix B. Item C of the Revised IRR of RA 9184 (Table Rating Factors for lease of Venue). Only service providers with a WEIGHTED AVERAGE OF NINETY ONE PERCENT (91%) shall be considered responsive.</i>						

**Other requirements:**

After having carefully read and accepted your Terms and Conditions. I/We quote you on the item at prices noted above.

Printed Name and Signature of authorized representative: \_\_\_\_\_

Position: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Fax No. \_\_\_\_\_ Tel No.: \_\_\_\_\_ Cellphone No.: \_\_\_\_\_

LBP Account Number of Establishment: \_\_\_\_\_

Date: \_\_\_\_\_

Do you have Mayor's/Business Permit ?  Yes  No

Philgeps Registration?  Yes  No

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Printed Name and Signature of Convasser: \_\_\_\_\_