

REQUEST FOR QUOTATION

	The Philippine Statistics Authority (PSA) through the Bids and Awards Committee (BAC), intends to		
procure	Training Kit with PSA Logo (29 November 2024)		
which sh	all be undertaken in accordance with	Section	n 53.9 (Small Value Procurement)
of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184, with an Approved Budget of the			
Contract	(ABC) in the amount of 40	,000.00	Forty Thousand Pesos Only
Please quote your best offer for the item/s described herein, subject to the Terms and Conditions provided			
below. Submit your quotation duly signed by you or your duly authorized representative not later than			
	at	through email at	bac-secretariat@psa.gov.ph
For any clarification, you may contact us at telephone no. (02) 8374-8263 or email address at			
gsdprocurement.psa@gmail.com			
	AMOD gm'ucas		
	MINERVA ELOISA P. ESQUIVIAS		
	Chairperson, Bids and Awards Committee		
TERMS AND CONDITIONS			
1	Bidders shall provide correct and accurate information required in this form.		
2	Price quotattion/s must be valid for a period of thirty (30) calendar days from the date of submission. Price quotation/s, to be denominated in Philippine peso, shall include all taxes, duties and/or levies payable.		
3 4	Quotations exceeding the ABC shall be rejected.		
5	Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and conditions stated herein. This procurement project is to be awarded by lot.		
6	Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or your duly authorized representative.		
7	In case of two or more bidders are determined to have submitted the LCRB, the PSA shall adopt and employ "draw lots" as the tie-breaking method to		
•	finally detrmine the single winning bidder in accordance with GPPB Circular 06-2005.		
8	The item/s shall be delivered according to the requirements specified in the Purchase Request (PR). The PSA shall have the right to inspect and/or test the goods to confirm their conformity to the Technical Specifications.		
9 10			
10	Payment shall be made after delivery and upon submission of the required supporting documents, i.e. Order Slip and/or Billing Statement, by the supplier. Our Government Servicing Bank, Land Bank of the Philippines, shall credit the amount due to the identified bank of the supplier not earlier than twenty four (24) hours, but not later than forty eight (48) hours, upon receipt of our advice. Please note that the corresponding bank transfer fee, if any, shall be chargeable to the account of the supplier.		
11	Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed period shall be imposed per day of delay. The PSA shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.		
	Documents to be submitted	Deadline	Remarks
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ISO 9001

Copy of the 2024 Mayor's/Business Permit and valid PhilGEPS Registration

PSA Complex, East Avenue, Diliman, Quezon City, Philippines 1101

Telephone: (632) 8938-5267

www.psa.gov.ph



Together with the quotation.

Date. 1/18
Time: 2:35pm

REQUEST FOR QUOTATION PR No. 24-10-1154

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows: Compliance with Total Amount Technical Specifications Unit (VAT Item(s) and Specification(s), minimum Unit Quantity Price (pls. check) Inclusive) Yes No Training Kit with PSA Logo: a) Customed Tote bag with logo -14.17 inch (L) x 4.33 inch (W) x 13.00 inch (H) b) Journal Notebook with logo (Hard Cover) A5 size, 80 leaves, 160 pages c) Gel Metal Pen, 0.5mm lot 1 100pcs (Please see attached) Specifications: For tote bag: Canvas tote bag, zippered with inside pocket (see attached) Please bring sample Date of Delivery: 29 November 2024 Total amount in words: Printed name of the authorized representative: _ Signature: Position: Name of Company: Address: Email address: Tel. No.: Mobile No.:___ Fax No.: Date: