

## REQUEST FOR QUOTATION

	NEGOEOT ON GOOD							
	The Philippine Statistics Authority (PSA) through the Bids and Awards Committee (BAC), intends to							
produro	Industrial Heavy Duty Paper Shredder							
procure	Il be undertaken in accordance with (sec. 52.1 b) Shopping							
of the 2016	6 Revised Implementing Rules and Regulations of Republic Act No. 9184, with an Approved Budget of the							
Contract (ABC) in the amount of 110,000.00 One Hundred Ten Thousand Pesos Only								
•	Please quote your <b>best offer</b> for the <b>item/s described herein</b> , subject to the Terms and Conditions provided bmit your quotation duly signed by you or your duly authorized representative <b>not later than</b>							
	4_APR 2022 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							
gsdprocure	ement.psa@gmail.com							
	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.							
2	Price guotation/s to be denominated in Philippine peso, shall include all taxes, duties and/or levies payable.							

- Quotations exceeding the ABC shall be rejected. 4
- Award of contract shall be made to the lowest calculated and responsive bid (LCRB). 5
- Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or your duly authorized representative. 6
- 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 7 method to finally detrmine the single winning bidder in accordance with GPPB Circular 06-2005.
- The item/s shall be delivered according to the requirements specified in the Purchase Request (PR). 8
- The PSA shall have the right to inspect and/or test the goods to confirm their conformity to the Technical Specifications. 9
- Payment shall be made after delivery and upon submission of the required supporting documents, i.e. Order Slip and/or Billing Statement, 10 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.
- Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed period 11 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
Copy of the 2022 Mayor's/Business Permit or valid PhilGEPS Registration	at Title State	In the property of the contract but before payment.  In the property of the contract but before payment.



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

Telephone: (632) 8938-5267

www.psa.gov.ph



## REQUEST FOR QUOTATION PR No. 22-03-0356

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

Compliance with

Item(s) and Specification(s), minimum	Unit	Quantity	Unit Price	Total Amount (VAT Inclusive)	Technical Specifications (pls. check)			
					Yes	No		
Industrial Heavy Duty Paper Shredder		2						
- P-4 security level or higher - 24 hours continuous duty motor without								
						- 1		
overheating or cycles		-						
- 30L minimum basket volume								
- Shred capacity of 10 sheets or more	-							
- Can shred plastic card and CD	-							
- With maintenance consumables (lubricating oil)								
XXXXXXXXXXXXXXX	1							
						<u> </u>		
Total amount in words:				-				
Printed name of the authorized representative:				_Signature:				
Name of Company:			Position:					
Address:	Email address:							
Fax No.: Tel. No.:	Tel. No.:Mobile No.:							
Date:								