

REQUEST FOR QUOTATION

	The Philippine Statistics Authority (PS	SA) through the Bids and Awards Committee (BAC), intends to								
procure Top Glass for conference and office tables										
which shall	Il be undertaken in accordance with	(52.1 b) Shopping								
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 12,000.00	Twelve Thousand Pesos Only								
	Please quote your best offer for the iter	m/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										
	APR 2022 at 11:00mm	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								
asdnrocure		rat telephone no. (02) 0374-0203 or email address at								
gauprocure	MINERVA ELOISA P. ESQUIVIAS Chairperson, Bids and Awards Committee TERMS AND CONDITIONS									
		Minominas								
	TE	ERMS AND CONDITIONS								
1										
2		thirty (30) calendar days from the date of submission.								
3		ine peso, shall include all taxes, duties and/or levies payable.								
4	Quotations exceeding the ABC shall be rejected.									
5	Award of contract shall be made to the lowest calculated and responsive bid (LCRB).									
6	Any interlineations, erasures or overwriting sha	all be valid only if they are signed or initialed by you or your duly authorized representative.								
7		to have submitted the LCRB, the PSA shall adopt and employ "draw lots" as the tie-breaking idder in accordance with GPPB Circular 06-2005.								
8		requirements specified in the Purchase Request (PR).								
9		test the goods to confirm their conformity to the Technical Specifications.								
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 Bar	nk, 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									
11	the corresponding bank transfer fee , if any, sh Liquidated damages equivalent to one tenth (1)	nall be chargeable to the account of the supplier. /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, wi	ithout 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 11:00mm	In case not yet available, you may submit your expired Mayor's/Permit with Official Receipt of renewal application. However, a copy of your 2022 Mayor's/Business Permit shall be required to be submitted after award of contract but before payment.			



PSA Complex, East Avenue, Diliman, Quezon City, Philippines 1101 Telephone: (632) 8938-5267

www.psa.gov.ph

RECEIVED GSD Procurement

Date:

Time:

REQUEST FOR QUOTATION PR No. 22-04-0612

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

J ==== 0	read and accepted the Terms and	Conditions, I/	We submit	our quota	tion/s for the iter	n/s as follow	vs:		
	Specification(s), minimum	Unit	Quantity	Unit Price	Total Amount (VAT Inclusive)	Compli Ted Specifica ch	ance with chnical ations (pls. eck)		
Top glass for confe	rence table (Oval shape)	Unit	1			Yes	No		
90cm (width x 180c	cm (length)	Offic	1						
Top gloss for office	4-11								
Top glass for office	tables, size:	Unit	9						
120cm (L) x 70cm (VV) X /5cm (H)	_							
XXXXXXX	XXXXXXXXXXXXXXXXX								
		-							
		+							
otal amount in words:				-					
rinted name of the authoriz	red representative:								
ame of Company:			-		Signature:				
ddress:				osition:					
ax No.:	Email address:								
ate:	Tel. No.: Mobile No.:								