

BID FORM

IMPORTANT NOTES/INSTRUCTIONS:

1. Make sure to read the Terms and Conditions stated in the Request for Quotation before filling out this form.
2. Use this form for your quotation. Additional bidder's proposal can also be attached to this form.
3. Ensure to indicate the price for the whole lot and the unit price per unit.
4. Ensure to fill-up the **TOTAL AMOUNT IN WORDS**.
5. Ensure to check the "Compliance with Technical Specifications" Column.
6. Submit your bid in any of the following:
 - a. Sealed in an envelope, or
 - b. Email to psa07.rbac@gmail.com only
7. Failure to follow these instructions will result to the disqualification of your entire quotation/bid.

Item No.	Item/s and specification/s (minimum)	Unit	Qty.	Approved Budget for the Contract (ABC) per unit	Unit Price (in Peso) Please indicate your offer/price here.	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check)	
							YES	NO
1	CATEGORY B Janitorial Supplies for the 3rd Quarter with the following technical specifications:	Lot	1	57,819.00			()	()
1.1	AIR FRESHENER, car use	bottle	16	80.00				
1.2	CLEANER, TOILET BOWL AND URINAL, 900ml-1000ml cap	bottle	16	44.00				
1.3	DETERGENT POWDER, all purpose, 1kg	pack	25	110.00				
1.4	DISINFECTANT SPRAY, aerosol type, 400-550 grams	bottle	14	130.00				
1.5	Fabric conditioner, 900 ml (for the mop head)	bottle	18	180.00				
1.6	Glass cleaner with handle, 500 ml.	bottle	30	200.00				
1.7	Muriatic Acid, 500ml	bottle	1	65.00				
1.8	Toilet deodorant cake, 100 g, refill	pc	200	65.00				
1.9	Trash bag, black, Large	roll	30	70.00				
1.10	Trash bag, XXL, COLOR: BLACK	pc	360	15.00				
1.11	Trash bag, black, small	roll	50	50.00				
1.12	Vinyl Tiles Liquid Wax	gal	6	1,860.00				

Item No.	Item/s and specification/s (minimum)	Unit	Qty.	Approved Budget for the Contract (ABC) per unit	Unit Price (in Peso) Please indicate your offer/price here.	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check)	
							YES	NO
1.13	Vinyl Tiles Stripper	gal	12	650.00				
	<u>Mode of Payment: SEND BILL Arrangement or 15-30 working days after receipt of the billing statement</u>						()	()
	<u>Price quotation/s validity: Must be valid for a period of thirty (30) calendar days from the date of submission.</u>						()	()
TOTAL AMOUNT IN WORDS : _____ _____								

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 of authorized representative/Signature _____

Position: _____

Name of Company _____

TIN #: _____ (Please specify if VAT or NON-VAT)

Address: _____ Email Address: _____

Fax No. _____ Tel No.: _____ Cellphone No. _____

Date: _____