

REQUEST FOR QUOTATION

RFQ # 2020-10-255 07 October 2020

The Philippine Statistics Authority-Region 7 (PSA-R07) through its Bids and Awards Committee (BAC) will undertake Alternative Mode of Procurement, <u>Shopping</u> for the <u>Supply and Delivery of Office Supplies and PPE Supplies for the Philippine Identification System (PhilSys) Preregistration Activities for the Month of October</u>

Name of Project	Philippine Identification System (PhilSys) Supplies and Materials for the Pre-registration Activities for the Month of October
Solicitation (If posted at the PhilGEPS)	0700-2020-10-065
Purchase Request No.	0700-2020-10-056
Location	Please refer to Bid Form for the delivery sites
Brief Description	Category A – PPE Supplies for the PhilSys Pre-registration Activities for the month of October
Quantity	Refer to Page 3 for the detailed quantity
Approved Budget for the Contract (ABC)	Php869,050.00
Contract Duration	2 days from receipt of the Purchase Order
Date of Delivery	2 days from receipt of the Purchase Order

Please quote your **best price** on the item/s listed below and submit personally your **SEALEDQUOTATION** not later than <u>12 October 2020,</u>12:00NN through the address below, subject to the Terms and Conditions provided in this RFQ:

Region 7 Bids and Awards Committee (R07 BAC) Philippine Statistics Authority – RSSO VII Gaisano Capital South Bldg, Colon St. Cebu City

Attn.: Mr. Cayylord D. Niala / Ms. Melita C. Jomuad / Ms. Irish B. Velasco

R07 BAC Secretariat

Contact Nos.: (032)412-6794/254-0470 (telefax)

Email address: psa07.rbac@gmail.com

EDWINA M. CARRIAGA R07 BAC Chairperson

Terms and Conditions:

- 1. Only the suppliers registered at the Philippine Government Electronic Procurement System (PhilGEPS) shall be allowed to submit the quotation.
- 2. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
- 3. Bidders shall provide correct and accurate information required in this form.
- 4. Bidders may quote for any or all lots and must quote all the items under a specific lot.
- 5. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or your duly authorized representative/s.
- 6. Late submission of quotation shall not be accepted.
- 7. Bids exceeding the ABC for each item/lot shall be disqualified.

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- 8. Award of contract shall be made to the Lowest Calculated and Responsive Bidder which complies with the specifications and other terms and conditions as stated herein.
- 9. The Lowest Calculated and Responsive Bidder shall be informed immediately.
- 10. In case of two or more bidders are determined to have submitted the Lowest Calculated Quotation / Lowest Calculated and Responsive Quotation, the PSA shall adopt and employ "draw lots" as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005.
- 11. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
- 12. The PSA shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
 - 13. The following documentary requirements must be submitted prior to payment:
 - Mayor's/Business Permit
 - PhilGEPS Registration Number/Certificate
- 14. 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.
- 15. Mode of payment shall be made either through check or Advice to Debit Account (ADA) to the supplier.
- 16. Liquidated damages equivalent to one tenth of one percent (0.1%) of the value of the goods not delivered within the prescribed delivery 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 to it.

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)	(i	Compliance with Technical Specifications (please check)		ns k)
1	CATEGORY A PPE Supplies to be used during the Pre-Registration with the following specifications:	lot	1	869,050.00			()	()
1.01	FACE MASK(50pcs/box) surgical, disposable, 3ply with earloop, RSSO - 4 Bohol - 160 Cebu - 233 Negros Oriental - 126	box	523	250.00			()	()
1.02	*Material Natural Rubber Latex *Color Pale Yellow, the color may vary due to storage time and conditions *Design Straight Fingers, Thumb and Fingers in one plane, Fits either *hand (Ambidextrous) Rolled Rim. *Shelf Life 3 years from the date of manufacture. *RSSO - 1 Bohol - 40 Cebu - 59 Negros Oriental - 32	box	132	650.00			()	()
1.03	**Full face shield *Anti-fog *Latex-free *One size fit all *with eyeglass frame **RSSO - 5 *Bohol - 222 *Cebu - 323 *Negros Oriental - 175	pcs.	725	50.00			()	()

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)			
1.04	*ALCOHOL (ETHYL 500ML) *at least 70% Ethanol (Ethyl alcohol) *Colorless Clear liquid *Cap: Flip-top/pull-up *Scented *RSSO - 10 Bohol - 444 Cebu - 646 Negros Oriental - 350	bottle	1450	110.00			()	()
1.05	*3ply, 1000 sheets *12 rolls/pack *SSO - 10 Bohol - 444 Cebu - 646 Negros Oriental - 350	pack	1450	120.00			()	()
1.06	*WET WIPES (100pcs/pack) *Unscented *Wipes contains the natural properties of aloe vera, lanolin, and vitamin E. *It is natural, mild and effective cleansing. *Paraben-free *Hypo-allergenic *Natural ingredients *Resable cover to prevent moisture loss *Sheet size: 200mm x 100mm *Thicker sheet *FDA Approved RSSO - 10 Bohol - 444 Cebu - 646 Negros Oriental - 350	pack	1450	150.00			()	()
1.07	Ascorbic Acid (Vit. C) *500mg RSSO - 90 Bohol - 3,996 Cebu - 5,814 Negros Oriental - 3,150	tablet	13,050	5.00			()	()
	Note: Project Sites/Place of Delivery are as follows:									
	1. RSSO - Engr. Ariel E. Florendo Regional Director PSA RSSO 7, 2/F Gaisano Capital South Bldg., Colon St., Cebu City						()	()

Mr. Firmo C. Diputado Chief Statistical Specialist PSA Cebu Provincial Office, 2/F Martina Sugbo Center, P. Burgos St., Brgy. San Roque, Cebu City						()	(
3. Bohol - Ms. Jessamyn Anne C. Alcazaren Chief Statistical Specialist PSA Bohol Provincial Office, 3/F Galleria Luisa Bldg., Gallares St., Poblacion II, Tagbilaran City, Bohol						()	(
4. Negros Oriental - Engr. Ariel T. Fortuito Chief Statistical Specialist PSA Negros Oriental Provincial Office, Purple Building, Valencia Road, Bagacay, Dumaguete City, Negros Oriental						()	(
Other Requirements:									
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Mode of Payment: SEND BILL Arrangement or 15-30 working days after receipt of the billing statement						()	(
Price quotation/s validity: Must be valid for a period of thirty (30) calendar days from the date of submission.						()	(
 TOTAL AMOUNT IN WORDS:									
Other Requirements:									
After having carefully read and acc prices noted above.	epted yo	our Terms	and Condit	ions. I/We quo	te you on the	e item	at		
Printed Name of authorized represe	entative	/Signature)						
Position:									
Name of Company									
TIN #:		(Please s	pecify if VA	T or NON-VAT	7)				
Address:	Address:Email Address:								
Fax No Tel N	lo.:		Cellp	hone No					
Data									

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