

#### REQUEST FOR QUOTATION

RFQ # 2020-12-460 .17 December 2020

The Philippine Statistics Authority-Region 7 (PSA-R07) through its Bids and Awards Committee (BAC) will undertake Alternative Mode of Procurement, <u>Small Value Procurement</u> for the <u>Fixtures</u>, <u>furnishing and equipment for the Philippine identification System (PhilSys) Fixed Registration Center of Cebu Provincial Office.</u>

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|--|---|--|--|--|--|--|--|
| Name of Project                          | Fixtures, furnishing and equipment for the Philippine identification  |  |  |  |  |  |  |
|  | System (PhilSys) Fixed Registration Center of Cebu Provincial Office. |  |  |  |  |  |  |
| Solicitation (If posted at the PhilGEPS) | 0700-2020-12-121  |  |  |  |  |  |  |
| Purchase Request No.                     | 0722-2020-12-058  |  |  |  |  |  |  |
| Location                                 | 2/f Martina Sugbo Ctr., P.Burgos St. Cebu City                        |  |  |  |  |  |  |
| Brief Description                        | Refer to Page 3 for detailed description.                             |  |  |  |  |  |  |
| Quantity                                 | Refer to Page 3 for detailed quantity.                                |  |  |  |  |  |  |
| Approved Budget for the                  | 988,500.00  |  |  |  |  |  |  |
| Contract (ABC)                           |   |  |  |  |  |  |  |
| <b>Contract Duration</b>                 | 5 days after the receipt of the P.O                                   |  |  |  |  |  |  |
| Date of Delivery                         | 5 days after the receipt of the P.O                                   |  |  |  |  |  |  |

Please quote your **best price** on the item/s listed below and submit personally your **SEALED QUOTATION** not later than **21 December 2020, 5:00 P.M** through the address below, subject to the Terms and Conditions provided in this RFQ:

Region 7Bids 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 the items.
- 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.
- 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 "drawlots" as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005.

# PHILIPPINE STATISTICS AUTHORITY Region 7 – Central Visayas REQUEST FOR QUOTATION

Page 2

- 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 <a href="mailto:psa07.rbac@gmail.com">psa07.rbac@gmail.com</a> only
- 7. Failure to follow these instructions will result to the disqualification of your entire quotation/bid.

| Item<br>No. | Item/s and specification/s<br>(minimum)  | Unit | Qty. | Approved<br>Budget for<br>the Contract<br>(ABC)<br>per unit | Unit<br>Pric<br>e (in<br>Peso<br>)<br>Pleas<br>e indic<br>ate<br>your<br>offer/<br>price<br>here. | Total<br>Amoun<br>t<br>(VAT<br>inclusive<br>) | Compliance<br>with Technical<br>Specifications<br>(please check) |     |  |
|-------------|--|------|------|---|---|---|--|-----|--|
|             |  |      |      |   |   |   | YES  | NO  |  |
|             | 55" LED Smart TV   |      |      |   |   |   |  |     |  |
| 1.          | <ul> <li>Specification:</li> <li>UHD 4K/3840 x 2160 Resolution</li> <li>4K High Dynamic Range</li> <li>4K X-Reality™ PRO</li> <li>Clear Audio+</li> <li>Youtube™</li> <li>Live Color™ Technology</li> <li>TRILUMINOS™ Display</li> <li>Motionflow™ XR 240 (native 60 Hz)</li> <li>Linux OS, VEWD Browser</li> <li>10 W + 10 W Audio Output</li> <li>HDMI x2, USB x2, Wifi Ready</li> <li>ISDB-T Digital Broadcasting</li> <li>Free wall mount bracket</li> <li>2 years warranty for parts and</li> </ul> | Unit | 1    | 45,000.00   |   |   | ( )  | ( ) |  |
|             | service<br>"CCTV   |      |      |   |   |   |  |     |  |
| 2.          | Specification:  • 1080p Turbo HD DVR  • 1080p Full HD Dome Cameras with Metal Housing  • 1080p Full HD Bullet Cameras with Metal Housing  • Image Sensor: 2MP CMOS Image Sensor  | Unit | 1    | 20,000.00   |   |   | ( )  | ( ) |  |

| _  | T   | ı     |   |           | 1 | 7 | r   |    |   |
|----|---|-------|---|-----------|---|---|-----|----|---|
|    | Effective Pixels: 1920  |       | ] |           |   |   |     |    | _ |
|    | (H)*1080(V)   |       |   |           |   |   |     |    |   |
|    | • Shutter Time: 1/25(1/30) s to   |       |   |           |   |   |     |    |   |
|    | 1/50,000 s  |       |   |           |   |   |     |    |   |
|    | • Lens: Angle of View:  |       |   |           |   |   |     |    |   |
|    | 103°(2.8mm), 82.2°(3.6mm),  |       |   |           |   |   |     |    |   |
|    | 54°(6mm)  |       |   |           |   |   |     |    |   |
|    | • Lens Mount: M12   |       |   |           |   |   |     |    |   |
|    | DVR Specs: H.264 & Dual-  |       |   |           |   |   |     |    |   |
|    | stream video compression  |       |   |           |   |   |     |    |   |
|    | DVR Specs: Support both HD-TVI  |       |   |           |   |   |     |    |   |
|    | and analog cameras with adaptive  |       |   |           |   |   |     |    |   |
|    | access  |       |   |           |   |   |     |    |   |
|    | DVR Specs: Full channel@1800P   |       |   |           |   |   |     |    |   |
|    | resolution real-time recording  |       |   |           |   |   |     |    |   |
|    | DVR Specs:HDMI and VGA  |       |   |           |   |   |     |    |   |
|    | output at up to 1920x1080P  |       |   |           |   |   |     |    |   |
|    | resolution  |       |   |           |   |   |     |    |   |
|    | • HDD: 1 TB;  |       |   |           |   |   |     |    |   |
|    | • 4 Channels;   |       |   |           |   |   |     |    |   |
|    | <ul> <li>Price Quotation should include<br/>delivery installation and materials.</li> </ul> |       |   |           |   |   |     |    |   |
|    | •   |       |   |           |   |   |     |    |   |
|    | GANG CHAIR  |       |   |           |   |   |     |    |   |
|    |   |       |   |           |   |   |     |    |   |
|    | Specification:  |       |   |           |   |   |     |    |   |
|    | Base Type: Chromed Steel  |       |   |           |   |   |     |    |   |
| 3. | Base Capacity: 500kgs   |       |   |           |   |   | ( ) | (  | ) |
| 3. |   | Pcs.  | 8 | 12,000.00 |   |   | ` ′ | `  | , |
|    | Mechanism Thickness: 3mm  |       |   |           |   |   |     |    |   |
|    | Chair Seating Capacity: 500kgs  |       |   |           |   |   |     |    |   |
|    | Heavy Duty Gang Chair   |       |   |           |   |   |     |    |   |
|    | • 5-Seater Gang Chair   |       |   |           |   |   |     |    |   |
|    | Base Type: Chromed Steel  |       |   |           |   |   |     |    |   |
|    | 1   |       |   |           |   |   |     |    |   |
|    | Base Capacity: 500kgs   |       |   |           |   |   |     |    |   |
|    | Mechanism Thickness: 3mm  |       |   |           |   |   |     |    |   |
|    | REGISTRATION OFFICE TABLE   |       |   |           |   |   |     |    |   |
|    |   |       |   |           |   |   |     |    |   |
|    | Specification:  |       |   |           |   |   |     |    |   |
|    |   |       |   |           |   |   |     |    |   |
|    | . Franctonding Table Charlings 9  |       |   |           |   |   | ( ) | 1, | ١ |
| 4. | • Freestanding Table, Steel Legs &  | Pcs.  | 8 | 12,000.00 |   |   | ` ' | `  | , |
|    | Modesty   |       |   |           |   |   |     |    |   |
|    | Bullnose Edge Tabletop  |       |   |           |   |   |     |    |   |
|    | Powder Coated Legs & Modesty  |       |   |           |   |   |     |    |   |
|    | • Color: Light Gray Top, Modesty  |       |   |           |   |   |     |    |   |
|    | 1   |       |   |           |   |   |     |    |   |
|    | & Legs  |       |   |           |   |   |     |    |   |
|    | • Size: W180xD70xH74 cm   |       |   |           |   |   |     |    |   |
|    | QUEUING TICKET DISPENSER  |       |   |           |   |   |     |    |   |
|    |   |       |   |           |   |   |     |    |   |
|    | Specification:  |       |   |           |   |   |     |    | _ |
|    | ·   |       |   |           |   |   | ( ) | (  | ) |
| _  | • Ticket dispenser includes are   |       |   |           |   |   |     |    |   |
| 5. | • Ticket dispenser includes one   |       |   |           |   |   |     |    |   |
|    | roll of T-80 Two - Digit x 2000   |       |   |           |   |   |     |    |   |
|    | Tickets,  |       |   |           |   |   |     |    |   |
|    | Please Take A Number Sign and   |       | 1 |           |   |   |     |    |   |
|    | Countertop Stand for Waiting line   |       |   |           |   |   |     |    |   |
|    | _   |       |   |           |   |   |     |    |   |
|    | Management  | unit  |   |           |   |   |     |    |   |
|    | Including delivery  | uiiit |   |           |   |   |     |    |   |
|    | • Warranty: One (1) year on parts   |       |   | 15,000.00 |   |   |     |    |   |
|    | and service;  |       |   |           |   |   |     |    |   |
|    |   |       |   |           |   |   |     |    |   |
|    |   |       |   |           |   |   |     |    |   |
|    | _   |       |   |           | - | - |     |    |   |

|    | LIGHTED SIGNAGE   |      |   |            |     |     |
|----|---|------|---|------------|-----|-----|
|    | Specification:  |      |   |            |     |     |
| 6. | <ul> <li>Specification: hanging or wall mount lighted signage; inside and outside office;</li> <li>Back to back Printed Panaflex / Sticker on Panaflex; dimensions: 24" x 36"; with Electrical wiring; Please refer to PSA</li> <li>Philsys sample layout; with installation on specified areas</li> <li>Including delivery, installation and materials;</li> </ul>   | Pcs. | 2 | 15,000.00  | ( ) | ( ) |
|    | Air Conditioning Unit   |      |   |            |     |     |
|    | Specification:  |      |   |            |     |     |
| 7. | <ul> <li>Split Type</li> <li>Floor-mounted</li> <li>Inverter</li> <li>3-TR</li> <li>1 PH</li> <li>220-240 VAC</li> <li>R410 or R32</li> <li>Inclusion: installation of unit (labor and materials)</li> </ul>  | Unit | 3 | 136,500.00 | ( ) | ( ) |
|    | DUPLO DIGITAL DUPLICATOR  |      |   |            |     |     |
| 8. | <ul> <li>with 3 feeding rollers</li> <li>300 x 600 DPI Scanning and Printing Resolution</li> <li>60, 90 to 130 COPIES PER MINUTE</li> <li>1,300 Sheets Feeder and Stacker Capacity</li> <li>USB Interface Ready</li> <li>With free Pedestal, 1 Cart ink, 1 roll Master roll per unit</li> <li>Lifetime Free Service, with Preventive Maintenance</li> <li>With Exclusive Distributor Certificate</li> </ul> | Unit | 1 | 250,000.00 | ( ) | ( ) |
|    | AUTOMATIC EMERGENCY LIGHT   | Pcs. |   |            |     |     |
| 9. | <ul> <li>FEATURES:</li> <li>Automatic operation (turns on instantly when power is cut-off)</li> <li>Fuse protected</li> <li>Illuminates areas more than 1 lux</li> <li>Equipped with overcharging protected</li> </ul>  |      | 4 | 3,000.00   | ( ) | ( ) |

|                        | Light source 2x3W High Power   |          |          |                    |         |              |      |    |   |
|------------------------|--|----------|----------|--------------------|---------|--------------|------|----|---|
|                        | SMT LED  |          |          |                    |         |              |      |    |   |
|                        | Battery 12V 9.0Ah Sealed   |          |          |                    |         |              |      |    |   |
|                        | Acid   |          |          |                    |         |              |      |    |   |
|                        | Charging Time <48hours Performance Time 8 hours for 2  |          |          |                    |         |              |      |    |   |
|                        | bulbs (at full charge)   |          |          |                    |         |              |      |    |   |
|                        | 14 hours for 1 bulbs (at full  |          |          |                    |         |              |      |    |   |
|                        | charge)  |          |          |                    |         |              |      |    |   |
|                        | LATERAL STEEL CABINET  |          |          |                    |         |              |      |    | _ |
|                        |  | Pc.      | 1        | 15,000.00          |         |              | (    | )  | ( |
| 10.                    | 4 drawers Size: W90cm X H138cm   |          |          | ,                  |         |              |      |    |   |
|                        | X D45cm, Gauge 20  |          |          |                    |         |              |      |    |   |
|                        | Note: Project Sites/Place of Delivery  |          |          |                    |         |              | Ι,   | )  | ( |
|                        | are as follows:  |          |          |                    |         |              | \    | ,  | ` |
|                        | (FREE DELIVERY)  Cebu -  |          |          |                    |         |              |      |    |   |
|                        | Mr. Firmo C. Diputado  |          |          |                    |         |              | (    | )  | ( |
|                        | Chief Statistical Specialist   |          |          |                    |         |              |      |    |   |
|                        | PSA Cebu Provincial Office, 2/F  |          |          |                    |         |              |      |    |   |
|                        | Martina Sugbo Center, P. Burgos  |          |          |                    |         |              |      |    |   |
|                        | St., Brgy. San Roque, Cebu City  |          |          |                    |         |              |      |    |   |
|                        | Other Requirements:  |          |          |                    |         |              |      |    |   |
|                        | 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 accepted prices noted above.   | your Ter | ms and ( | Conditions. I/We q | uote yo | ou on the it | em a | at |   |
|                        | Printed Name of authorized representativ   | e/Signat | ure      |                    |         |              | _    |    |   |
|                        | Position:  | _        |          |                    |         |              |      |    |   |
|                        | Name of Company  |          |          |                    |         |              | _    |    |   |
|                        | TIN #: (Please specify if VAT or NON-VAT)  |          |          |                    |         |              |      |    |   |
| Address:Email Address: |  |          |          |                    |         |              |      |    |   |

Fax No. \_\_\_\_\_. Tel No.: \_\_\_\_\_ Cellphone No.\_\_\_\_\_

Date: \_\_\_\_\_

SPECIFICATIONS: