

REPUBLIC OF THE PHILIPPINES PHILIPPINE STATISTICS AUTHORITY

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake alternative mode of procurement (**shopping**, **small value**, **etc**.) for <u>Information</u> <u>Technology Accessories and Peripherals</u>. Details of the procurement are as follows:

| Name of Project | Biometric Device (Face Recognition) | | | |
|---|--|--|--|--|
| Solicitation No. | PR-ITDS02-20-07-00020 | | | |
| Location | Metro Manila | | | |
| Brief Description | Procurement of Biometric Device (Face Recognition) for official PSA use | | | |
| Quantity | See attached Bid form. | | | |
| Approved Budget for the Contract (ABC) | ₱ 189,000.00 | | | |
| Date of Delivery | | | | |

Please quote your lowest price on the item/s listed on the next page and submit the quotation manually to the **BAC Secretariat**, 11th **FIr., Cyberpod One Eton Centris, Diliman, Quezon City** or through facsimile number 374-8283 or email to gsd.staff@psa.gov.ph not later than <u>n</u>:00 AM/PM on <u>I2 3 JUL 2020</u>. Kindly address your quotation to the Bids and Awards Committee.

HIN'N 9 Milleri NERVA ELOISA P. ESQUIVIAS BAC Chairperson

Terms and Conditions:

- 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 and/or proposal.
- 3. Late submission of quotation shall not be accepted.
- 4. Bids exceeding the ABC shall be disqualified.
- The Lowest bidder shall be informed immediately and shall be asked to submit additional requirements within three days after the opening of bids or during post qualification.
- Award of contract shall be made to the lowest quotation, and complies with the specifications and other terms and conditions as stated in the RFQ.
- 7. Terms of Payment shall be made through check payable to the supplier.
- 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.

PHILIPPINE STATISTICS AUTHORITY REQUEST FOR QUOTATION Fax no.: 374-82-83/ 374-82-62

~

BID FORM

| Item(s) and specification(s) Minimum | Unit | Qty. | Unit Price | Total Amount (VAT inclusive) | Compliance with Technical Specifications (pls. check) Yes No | |
|---|------|------|------------|---------------------------------------|--|----|
| | | | | | 105 | |
| Biometrics Device (Face Recognition) | pcs | 7 | P | ₽ | () | () |
| Specifications Display: 4.3 Inch Touch Screen Face Capacity: 4,000 Fingerprint Capacity: 4,000 Logs Capacity: 100,000 transactions Features Multi-language support High-verification speed Advanced and user-friendly User Interface Chip encryption for firmware protection Optional built-in battery backup providing approximately 4 hours of continuous operation Easy to extend functions and customizations based on client's requirements One face template is registered for one user only Able to detect whether the face is an actual face or a photo enhancing the security level of verification Dual Communication Port: Built-in USB slot & TCP/IP (Transmission Control Protocol/Internet Protocol) Technical Details Communication: TCP/IP, RS232/485, USB Host Standard Functions: Automatic Status Switch, Self-Service Query, Work Code, SMS, DST, T9 Input, 9 Digit User ID, Scheduled Bell, Photo ID Wiegand Signal: Output Optional Functions: ID/MiFace Card, WiFi, AMDS, 2000 mAh backup battery | μα | | r | P Total amount in words: | | |
| Input, 9 Digit User ID, Scheduled Bell, Photo ID - Wiegand Signal: Output - Optional Functions: ID/MiFace Card, WiFi, | | | | | | |

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: | | | | | | |
| | | | | | | |
| Address: | Email Address: | | | | | |
| Fax No Tel I | No.: Cellphone No | | | | | |
| Date: | _ | | | | | |