

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 **Re-Post: Acrylic Signage**. Details of the procurement are as follows:

Name of Project	Supply and Delivery of Acrylic Signage
Solicitation	P. R. No. FAS-18-07-288
Location	Quezon City
Brief Description	Procurement of Good
Quantity	See attached bid form.
Approved Budget for the	
Contract (ABC)	₱ 5,400.00
Contract Duration	

Please quote your lowest price on the item/s listed below and submit personally your **SEALED QUOTATION** not later than 5:00 pm on **September 19, 2018** at the General Services Division, 11th Flr., Cyberpod One Eton Centris, Diliman, Quezon City.

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. Late submission of quotation shall not be accepted.
- 4. Bids exceeding the ABC shall be disqualified.
- 5. 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.
- 6. 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.
- 8. 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.

BID FORM

P.R. NO: FAS-18-07-288

2	 	YES	NO
2	 		
	Total Amount in words:		

Other requirements:

After having carefully at prices noted above.		Terms and Conditions. I/We quote yo	ou on the item
Printed Name of autho	orized representative/Sigr	nature	
Position:			
Name of Company			
Address:		Email Address:	
Fax No	Tel No.:	Cellphone No	
Doto			



Population and Housing Census Division

Industry Statistics Division