



REQUEST FOR QUOTATION

RFQ # 0761-RFQ2023-07-055

25 July 2023


The Philippine Statistics Authority-Region 7 (PSA-R07) through its Bids and Awards Committee (BAC) will undertake Alternative Mode of Procurement, **Small Value Procurement** for the **Repair and Replacement of Parts of the Two (2) Airconditioning Units and Installation of Electrical Wirings of New Power Supply for One (1) Airconditioning Unit of PSA Siquijor**.

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| Name of Project | <i>Repair and Replacement of Parts of the Two (2) Airconditioning Units and Installation of Electrical Wirings of New Power Supply for One (1) Airconditioning Unit of PSA Siquijor</i> |
| Solicitation (If posted at the PhilGEPS) | N/A |
| Purchase Request No. | PR #0761-2023-07-038 |
| Location | 3/F Siquijor Business & Convention Center, Poblacion, Siquijor, Siquijor |
| Brief Description | <i>Repair and Replacement of Parts of the Two (2) Airconditioning Units and Installation of Electrical Wirings of New Power Supply for One (1) Airconditioning Unit of PSA Siquijor</i> |
| Quantity | Please see page 3 of the RFQ for the detailed quantity |
| Approved Budget for the Contract (ABC) | Php 33,670.00 |
| Contract Duration | 05-10 working days after receipt of PO |
| Date of Delivery | 05-10 working days after receipt of PO |

Please quote your best price for the item described herein, subject to the Terms and Conditions provided in this RFQ. **Submit your sealed quotation duly signed by you or your duly authorized representative personally not later than 31 July 2023, 05:00 PM through the address 3/F Siquijor Business & Convention Center Siquijor.**

Note: Online submission of accomplished bid form/s will not be accepted.

For any clarification, you may contact **Ms.Rizalyn Teodora G. Postrado** at telephone nos. **(035 344-2002/(035)480-9003**.


JILL BERNADETTE C. ABING
SrSS - BAC Member

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. If the procurement is done by lot, the bidder 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.
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.

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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.
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 issuance of Purchase Order/Contract:
 - *Mayor’s/Business Permit*
 - *PhilGEPS Registration Number/Certificate*
 - *Income/Business Tax Return (for ABCs above P500K)*
 - *Omnibus Sworn Statement (for ABCs above P50K)*
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. Payment shall be made after delivery and upon the submission of the required supporting documents, i.e. documentary requirements mentioned above (item no. 13), billing statement from the supplier. Our Government Servicing Bank, i.e. the Land Bank of the Philippines, shall credit the amount due to the supplier’s identified bank account not earlier than twenty-four (24 hours), but not later than forty-eight (48) hours, upon receipt of our advice.
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.

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| | Note: Place of Delivery/Location/Site of Project Repair/Installation | | | | | | () | () |
| | Joselito C. Maghanoy (Supervising Statistical Specialist) Officer-in-Charge PSA Siquijor Provincial Statistical Office 3/F Siquijor Business and Convention Center Building Poblacion, Siquijor, Siquijor | | | | | | () | () |
| | Other Requirements: | | | | | | () | () |
| | <u>Mode of Payment: SEND BILL Arrangement or within thirty (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 : | | | | | | | |
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Other Requirements:

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| <p>Terms of Payment:</p> <p><i>Payment shall be made either through check or Land Bank's LDDAP-ADA/Bank Transfer facility, within thirty (30) working days after Submission of Billing/Statement of Account and User Acceptance of the product. Bank Transfer fee shall be charged against the creditor's account.</i></p> <p><u>Payment Details:</u></p> <p>Banking Institution: _____</p> <p>Account Number: _____</p> <p>Account Name: _____</p> <p>Branch: _____</p> |
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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: _____