

## REQUEST FOR QUOTATION

	The Philippine	Statistics A	uthority (PSA)	through the Bids and Awards Committee (BAC), intends to						
procure		CCTV Camera (includes installation package)								
which shall be undertaken in accordance with				Section 52.1(b) (Shopping)						
of the 20	16 Revised Implem	enting Rule	s and Regulation	ons of Republic Act No. 9184, with an Approved Budget of the						
Contract (ABC) in the amount of Php 14,990.00				Fourteen Thousand Nine Hundred Ninety Pesos						
	Please quote yo	our best offe	er for the item/s	described herein, subject to the Terms and Conditions provided						
below. S	ubmit your quotatio	n duly signe	d by you or you	r duly authorized representative not later than						
21	October 2022	at	11:00 AM	through email at bac-secretariat@psa.gov.ph and bacsecretariat.psa@gmail.com						
	For any clarifica	ation, you ma	y contact us at	telephone no. (02) 8374-8263 or email address at						
gsdprocu	rement.psa@gmail.co	<u>om</u>								
	AM In am weis									
				MINERVA ELOISA P. ESQUIVIAS						
				$/\phi$ hairperson, Bids and Awards Committee						

## TERMS AND CONDITIONS

- 1 Bidders shall provide correct and accurate information required in this form.
- 2 Price quotattion/s must be valid for a period of thirty (30) calendar days from the date of submission.
- 3 Price quotation/s, to be denominated in Philippine peso, shall include all taxes, duties and/or levies payable.
- 4 Quotations exceeding the ABC shall be rejected.
- 5 Award of contract shall be made to the lowest calculated and responsive bid (LCRB).
- Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or your duly authorized representative.
- In case of two or more bidders are determined to have submitted the LCRB, the PSA shall adopt and employ "draw lots" as the tie-breaking method to finally detrmine the single winning bidder in accordance with GPPB Circular 06-2005.
- 8 The item/s shall be delivered according to the requirements specified in the Purchase Request (PR).
- The PSA shall have the right to inspect and/or test the goods to confirm their conformity to the Technical Specifications.
- Payment shall be made after delivery and upon submission of the required supporting documents, i.e. Order Slip and/or Billing Statement, by the supplier. Our Government Servicing Bank, Land Bank of the Philippines, shall credit the amount due to the identified bank of the supplier not earlier than twenty four (24) hours, but not later than forty eight (48) hours, upon receipt of our advice. Please note that the corresponding bank transfer fee, if any, shall be chargeable to the account of the supplier.
- Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed 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 open to it.

Documents to be submitted	Deadline		Remarks			
Copy of the 2022 Mayor's/Business Permit or valid PhilGEPS Registration	Not later than	11:00 AM	In case not yet available, you may submit your expired Mayor's/Permit with Official Receipt of renewal application. However, a copy of your 2022 Mayor's/Business Permit shall be required to be submitted after award of contract but before payment.			
	logether with the quotati	on				



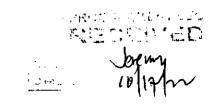
Management System ISO 9001:2015



PSA Complex, East Avenue, Diliman, Quezon City, Philippines 1101

Telephone: (632) 8938-5267

www.psa.gov.ph



## REQUEST FOR QUOTATION PR No. 22-10-1688

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s for the item/s as follows:

Item(s) and Specification(s), minimum		Quantity	Unit Price	Total Amount (VAT Inclusive)	Compliance with Technical Specifications (pls. check) Yes No	
CCTV Camera (includes installation package)		1		,	100	140
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Total amount in words:	·					
Printed name of the authorized representative:	Signature:					
Name of Company:	Position:					
Address:	Email address:					
Fax No.:Tel. No.:						
Nate:						