



Republic of the Philippines  
**Philippine Statistics Authority**  
Region V – Bicol

## REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake Small Value Procurement as Alternative Mode of Procurement for official use of PSA Camarines Sur with the following details:

|   |   |
|---|---|
| <b>Name of Project</b>                        | Procurement of General Preventive Maintenance of Isuzu Dmax LT Pick-up with plate number SAB-6448 |
| <b>Solicitation</b>                           | 2023-12-190A-CS   |
| <b>Location</b>                               | PSA Camarines Sur Provincial Statistical Office   |
| <b>Brief Description</b>                      | (See Bid Form, <i>Page 2</i> )  |
| <b>Quantity</b>                               | (See Bid Form, <i>Page 2</i> )  |
| <b>Approved Budget for the Contract (ABC)</b> | Php 44,523.00   |
| <b>Contract Duration</b>                      | Five (5) days upon receipt of Purchase Order  |

Please quote your **Lowest Price** on the item/s listed below and submit your **SEALED QUOTATION** not later than **9:00 am on January 8, 2023** at **PSA Camarines Sur Provincial Statistical Office, #774 Panganiban Avenue, Naga City.**

**CECILLE A. BRIONES**  
RBAC Chairman

### Terms and Conditions:

1. Only the suppliers registered at the Philippine Government Electronic Procurement System (PhilGEPS) shall be allowed to submit the quotation.
2. Supplier must be an authorized re-seller of original equipment manufacturer.
3. All entries must be typewritten/printed legibly in the Bid Form. Failure to use this form will result to disqualification of your bid.
4. Late submission of quotation shall not be accepted.
5. Bids exceeding the ABC shall be disqualified.
6. The lowest bidder shall be informed immediately and shall be asked to submit the following requirements within three days after the opening of bids or during post qualification:
  1. Mayor's/Business Permit
  2. PhilGEPS Registration Number
7. 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.
8. Terms of Payment shall be made through check payable to the supplier.
9. 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**

| Item/s and Specification/s<br>(Minimum)  | Unit | Qty  | Unit Price | Total Amount<br>(VAT inclusive) | Compliance with<br>Technical<br>Specifications<br>(please check) |     |
|--|------|------|------------|---------------------------------|--|-----|
|  |      |      |            |                                 | YES  | NO  |
| <b>Procurement of General Preventive Maintenance of Isuzu Dmax LT Pick-up with plate number SAB-6448</b> |      |      |            |                                 |  |     |
| <b>Recommendation</b>  |      |      |            |                                 |  |     |
| <b>1. Labor</b>  |      |      |            |                                 |  |     |
| Pull down transmission to replace clutch component   |      |      | P _____    | P _____                         | ( )  | ( ) |
| <b>2. Parts/Materials</b>  |      |      |            |                                 |  |     |
| Pressure plate   | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
| Clutch disc  | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
| Release bearing  | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
| Pilot bearing  | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
| Clutch fork  | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
| Isuzu brake cleaner  | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
| Shop materials<br>For official use of PSA-Camarines Sur  | pc   | 1.00 | P _____    | P _____                         | ( )  | ( ) |
|  |      |      |            | Total amount in words:          |  |     |
|  |      |      |            | _____                           |  |     |
|  |      |      |            | _____                           |  |     |
|  |      |      |            | _____                           |  |     |

**Other requirements:**

After having carefully read and accepted your Terms and Conditions. I/We quote you on the item at prices noted above.

Printed Name and Signature of authorized representative: \_\_\_\_\_

Position: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

LBP Account Number of Establishment: \_\_\_\_\_

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

Do you have Mayor's/Business Permit ? \_\_\_ Yes \_\_\_ No

Philgeps Registration? \_\_\_ Yes \_\_\_ No

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Printed Name and Signature of Canvasser: \_\_\_\_\_