



## REQUEST FOR QUOTATION

RFQ # 2022-05-296

17 MAY 2022

The Philippine Statistics Authority-Region 7 (PSA-R07) through its Bids and Awards Committee (BAC) will undertake Alternative Mode of Procurement, **Shopping** for the Procurement of Regular Supplies of PSA RSSO VII for the 1st Semester of 2022.

Name of Project	Procurement of Regular Supplies of PSA RSSO VII for the 1st Semester of 2022.
Solicitation (If posted at the PhilGEPS)	0700-2022-05-059
Purchase Request No.	PR# 0700-2022-05-044
Location	PSA RSSO7, Gaisano Capital South Bldg. Colon st. Cebu City
Brief Description	<b>LOT 3- Janitorial Supplies for the 1st Semester of 2022</b>
Quantity	Please refer to page 2 of the RFQ for detailed quantity
Approved Budget for the Contract (ABC)	<b>Php7,700.00</b>
Contract Duration	
Date of Delivery	3-5 working days after the receipt of Purchase Order

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 not later than **30 May 2022, 5:00 PM** through the address **PSA - RSSO7 (2nd Floor) , Gaisano Capital South Bldg., Colon St., Cebu City.**

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

For any clarification, you may contact Ms. Erah Mhay Quiñones/Ms. Jean B. Villacensio/ Ms. Marie Cris L.Lerio at telephone nos. (032) 412-6794 / 254-0470.

**EDWINA M. CARRIAGA**  
R07 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. 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.
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
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
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
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.

**BID FORM**

**IMPORTANT NOTES/INSTRUCTIONS:**

1. Make sure to read the Terms and Conditions stated in the Request for Quotation before filling out this form.
2. Use this form for your quotation. Additional bidder's proposal can also be attached to this form.
3. Accomplish this form correctly and accurately.
4. Do not alter the contents of this form in any way.
5. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
6. Ensure to indicate the price for the whole lot and the unit price per unit.
7. Ensure to fill-up the **TOTAL AMOUNT IN WORDS**.
8. Ensure to check the "Compliance with Technical Specifications" Column.
- 9. Submit your bid sealed in an envelope.**
10. Failure to follow these instructions will result to the disqualification of your entire quotation/bid.

Item No.	Item/s and specification/s (minimum)	Unit	Qty.	Approved Budget for the Contract (ABC) per unit	Unit Price (in Peso) Please indicate your offer/price here.	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check)	
							YES	NO
<b>Procurement of Regular Supplies of PSA RSSO VII for the 1st Semester of 2022</b>								
<b>1</b>	<b>LOT 3- JANITORIAL SUPPLIES</b>	<b>LOT</b>	<b>1</b>	<b>7,700.00</b>			( )	( )
1.1	DETERGENT POWDER, all purpose, 1kg/pack	pack	10	120.00			( )	( )
1.2	INSECTICIDE, aerosol type, net content: 600ml min	can	15	400.00			( )	( )
1.3	RAGS, all cotton, 32 pieces/bundle	bundle	5	100.00			( )	( )
	<b>Mode of Payment: SEND BILL Arrangement or within thirty (30) working days after receipt of the billing statement.</b>						( )	( )
	<b>Price quotation/s validity: Must be valid for a period of thirty (30) calendar days from the date of submission.</b>						( )	( )
TOTAL AMOUNT IN WORDS :								

Other Requirements:

**Terms of Payment:**

**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.**

**Payment Details:**

Banking Institution: \_\_\_\_\_

Account Number: \_\_\_\_\_

Account Name: \_\_\_\_\_

Branch: \_\_\_\_\_

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

Signature Over Printed Name of Authorize Representative \_\_\_\_\_

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

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

TIN #: \_\_\_\_\_ (Please specify if **VAT or NON-VAT**) \_\_\_\_\_

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

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

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