

## REPUBLIC OF THE PHILIPPINES PHILIPPINE STATISTICS AUTHORITY RSSO XIII (CARAGA)

## REQUEST FOR QUOTATION

The Philippine Statistics Authority through its Regional Bids and Awards Committee (RBAC) will undertake alternative mode of procurement, <a href="Manual-and-Machine Processing">Shopping</a> on PPE's for the 2020 CPH Manual and Machine Processing.

| Name of Project                        | General Administrative Support Service     | 7 |
|----------------------------------------|--------------------------------------------|---|
| Solicitation                           | RSSO PR No. 2020-10-219                    |   |
| Location                               | PSA - RSSO XIII                            |   |
| Brief Description                      | Refer to Bid Form below                    |   |
| Quantity                               | Refer to Bid Form                          |   |
| Approved Budget for the Contract (ABC) | L1: Php160,800; L2: 25,410; L3: Php 14,000 |   |
| Date of Delivery                       | 10 Days after receipt of Purchase Order    |   |

Please quote your **lowest price** on the item/s listed below and submits personally using this Request for Quotation Form not later than 10:00 A.M on **November 9, 2020** at the Regional Statistical Services Office XIII (Caraga), Freeman Building, J.C. Aquino Avenue, Butuan City.

MELCHOR B. BAUTISTA RBAC Vice 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. Terms of Payment shall be made through check payable to the supplier.
- 6. Please submit/update your registration with the PSA (please disregard if you have already submitted/updated your registration with us), If none yet, submit, together with your quotation the photocopy of your DTI /SEC registration, Municipal and business permit, Tax Clearance, BIR Certificate of Registration and current ITR and Phil. Government Electronic Procurement System (PhilGEPS) Registration.
- 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. 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.
- 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.

| Item/s and specification/s (minimum)                                            | Unit   | Qty. | Unit Price | Total Amount (VAT inclusive) | Compliance with Technical<br>Specifications (Please<br>check) |    |
|---------------------------------------------------------------------------------|--------|------|------------|------------------------------|---------------------------------------------------------------|----|
|                                                                                 |        |      |            |                              | YES                                                           | NO |
| 2020 Census of Population and Housing (2020 CPH)  Manual and Machine Processing |        |      |            |                              |                                                               |    |
| 1 : 4                                                                           |        |      |            |                              |                                                               |    |
| Lot 1:                                                                          |        |      |            |                              |                                                               |    |
| Surgical face mask, 3 ply, 50s                                                  | box    | 536  | ₱          | ₽                            |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
| Lot 2:                                                                          |        |      |            |                              |                                                               |    |
| Glass frame faceshield, direct splash protection                                | nicee  | 460  | ₽          | ₽                            |                                                               |    |
| olass frame facestileid, direct spiasif protection                              | piece  | 462  | P          | P                            |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
| Lot 3:                                                                          |        |      |            |                              |                                                               |    |
| Ethyl alcohol, 70%-75% solution, 500mL                                          | bottle | 200  | P          | P                            |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
|                                                                                 |        |      |            |                              |                                                               |    |
| TOTAL AMOUNT IN FIGURES:                                                        |        |      |            |                              |                                                               |    |
|                                                                                 |        |      |            | P                            |                                                               |    |
| TOTAL AMOUNT IN WORDS:                                                          |        |      |            |                              |                                                               |    |

| Other Requirements:                                               |                                                        |
|-------------------------------------------------------------------|--------------------------------------------------------|
| After having carefully read and accepted your Terms and Condition | ons. I/We quote you on the item at prices noted above. |
| Printed Name of authorized representative/Signature:              |                                                        |
| Position:                                                         |                                                        |
| Name of Company:                                                  |                                                        |
| Address:                                                          | EmailAddress:                                          |
| Fax No Tel No                                                     | Cellphone No                                           |
| Date:                                                             |                                                        |