

REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake alternative mode of procurement, (small value) Goods

| Name of Project | Venue, Food & Accommodation – Training on Statistical |
|-------------------------|---|
| | Software Packages |
| Solicitation | MAS 18-09-127 |
| Location | Quezon City |
| Brief Description | Procurement ofGoods. |
| Quantity | See attached bid form. |
| Approved Budget for the | |
| Contract (ABC) | ₱614,000.00 |
| Contract Duration | |

Please quote your lowest price on the item/s listed below and submit personally your SEALED QUOTATION not later than <u>5:00 pm</u> on <u>September 19, 2018</u> at the General Services Division, 11th Floor, Cyberpod One Eton Centris, Diliman, Quezon City.

| BAC | Secretariat |
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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. 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.
- 6. 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.
- 7. Terms of Payment shall be made through check payable to the supplier.
- 8. 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 (minimum) | Unit | Qty. | Unit Price | Total Amount (VAT inclusive) | Compliance with Technical Specifications (please check) YES NO | |
|---|------|------|---------------|---------------------------------------|--|-----|
| Venue, Food and Accommodation –Training on Statistical Software Packages for Resource Person, SOCD Chiefs, and technical staff, and Central Office Staff 26-28 September 2018 | | | | | | |
| Venue: within Pasay City Mode of Payment: Send Bill | | | | | | |
| Details: 25 September – Check in with PM snacks and Dinner | рах | 32 | P | P | | |
| 12 Triple sharing Rooms, all single beds with individual blankets, no double decks, with coffee/ Drinking water and complete toiletries | | | | | | |
| 26-28 September – Breakfast/AM & PM Snacks/ Lunch and Dinner (3 days) | pax | 81 | P | P | | |
| Rooms, all single beds with individual blankets, no double decks, with coffee/drinking water and complete toiletries | | | | | | a a |
| a. 2 single-occupancy roomsb. 28 triple-sharing rooms | | | | | | |
| 29 September – Check in with Breakfast, Snack, and Lunch | pax | 32 | P | P | | |
| 12 Triple sharing Rooms , all single beds with individual blankets, no double decks, with coffee/ Drinking water and complete toiletries | | | P | P | | |
| Requirements: Spacious conference room good for 100 pax, air conditioned, high ceiling, no pillars and good lightning and sound system Unlimited wifi access Provision of facilities such as whiteboard, sound system, 5 microphones, batteries, wide screen, extension cords, pencil and paper, projector and other meeting tools that may be needed during the training Provision of flowing coffee/drinking water and candies Two (2) projectors in the function room Free use of facilities Free welcome streamer and tarpaulin Free use of local calls | | | | | | |
| X-X-X-X-X-X-X-X-X-X-X-X-X | | | | | | |

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 of authorized representative/Signature_____

Position: _____

Name of Company _____

Address: ______Email Address: _____

Fax No. ______. Tel No.: ______ Cellphone No._____

Date: _____