



## REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) Regional Statistical Services Office (RSSO) MIMAROPA Statistical Operations and Coordination Division (SOCD) through Regional Office-Bids and Awards Committee (RO-BAC) will undertake alternative mode of procurement Small Value Procurement - pursuant to the provisions of R.A. 9184, to wit:

| Name of Project                        | Accommodation for the Conduct of Second Level Training on the 2024 ASPBI and SICT Field Operations and Manual Processing |  |  |  |
|--|--|--|--|--|
| Solicitation                           | 2025-03-0143   |  |  |  |
| Place of Delivery                      | Calapan City, Oriental Mindoro   |  |  |  |
| <b>Brief Description</b>               | Accommodation  |  |  |  |
| Quantity                               | 1 lot  |  |  |  |
| Approved Budget for the Contract (ABC) | P 78,000.00  |  |  |  |
| Date of Delivery                       | March 23-29, 2025  |  |  |  |

Please quote your lowest price on the attached bid form and submit personally your SEALED QUOTATION not later than 9:00 AM on Thursday, March 20, 2025 at the Civil Registration and Administrative Support Division (CRASD), 2<sup>nd</sup> Floor, Emerald Building (PRIMA), J.P Rizal St. Camilmil, Calapan City.

| Received by:        |  |
|---------------------|--|
| Name and Signature: | ## ## ## ## ## ## ## ## ## ## ## ## ## |
| Company:            | <u>VENERANDA F∯ MENDOZA</u>            |
| Date:               | PSA-RO-BAC Chairperson                 |

## **Terms and Conditions:**

- 1.All entries must be written legibly in the Bid Form.
- Late submission of quotation shall not be accepted.
- Bids exceeding the ABC shall be disqualified.
- 4. Requirements:
  - i. Copy of PhilGEPS Registration
  - ii. Mayor's Permit/Business Permit
  - iii. Income/Business Tax Return (for ABCs above P500K)
  - iv. Omnibus Sworn Statement (Emergency Procurement with ABC at least P500,000.00 and for Small Value Procurement with ABC at least P50,000.00)
- 5. Award of contract shall be made to the lowest/single calculated and responsive bid.
- 6. Terms of Payment shall be made through check/ADA payable to the supplier.
- 7. Warranty shall be for a period of six (6) months for goods and one (1) year for equipments from date of acceptance by the procuring entity.
- 8. Price validity shall be a period of 30 calendar days for goods and six (6) months for services.
- 9. Pending the perfection of Purchase Order/Service Agreement/Contract of Service, 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.







## PHILIPPINE STATISTICS AUTHORITY Regional Statistical Services Office MIMAROPA REQUEST FOR QUOTATION Page 2



**BID FORM** 

| Item/s and Specification/s (minimum)  Accommodation for the Conduct of Second Level Training on the 2024 ASPBI and SICT Field Operations and Manual Processing |   | Qty.       | Unit<br>Price | Total<br>Amount<br>(VAT<br>inclusive) | Compliance with<br>Technical<br>Specifications<br>(please check)  |      |
|--|---|------------|---------------|---------------------------------------|---|------|
|  |   |            |               |                                       | YES   | NO   |
| Date: March 24-28, 2025  |   |            |               |                                       |   |      |
| Check-in: March 23, 2025   |   |            |               |                                       |   |      |
| Check-out: March 28 & 29, 2025   |   |            |               |                                       | Amount 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 - 1100 |      |
| Accommodation and Meals  | 1                                       | lot        |               |                                       | ( )   | ( )  |
| 2 pax, March 23-29, 2025, 6 days   |   |            |               |                                       |   |      |
| 8 pax, March 23-28, 2025, 5 days   | *************************************** |            |               |                                       |   |      |
| Two (2) rooms to accommodate 1 pax per room  |   |            |               |                                       |   |      |
| One (1) room to accommodate 2 pax per room   |   |            |               |                                       |   |      |
| Two (2) rooms to accommodate 3 pax per room  |   |            |               |                                       |   |      |
| Room, toilet and bath should be in clean and good condition  |   |            |               |                                       |   |      |
| With complimentary toiletries  |   |            |               |                                       |   |      |
| With daily replenishment of complimentary 500 ml bottled water   |   |            |               | 416,35                                |   |      |
| Free use of hotel facilities and amenities   |   |            |               |                                       |   |      |
| With Complimentary Breakfast   |   |            |               |                                       |   |      |
| Dinner will be served during the entire duration of stay   |   |            |               |                                       |   |      |
| **nothing follows**  |   |            |               | W TO                                  |   |      |
| TOTAL  | 3 7 2                                   |            | 12 - 12 Y     |                                       |   |      |
| After having carefully read and accepted your Terms Printed Name of authorized representative/Signatu Position: Name of Company                                | re                                      |            |               | 38.00                                 | ices noted abo  | ove. |
| Address:   |   |            |               |                                       |   |      |
| Fax No Tel No.:  |   |            |               |                                       |   |      |
| Date:  |   |            |               |                                       |   |      |
| LBP Account No. of Establishment:  |   | Name of F  | Payee:        |                                       |   |      |
| Tax Identification Number:   | Cop                                     | y of PhilG | EPS Registra  | ntion No.:                            |   |      |
| BIR Registration:  Canvassed by:  Canvasser  | -VA                                     | ·Τ         |               |                                       |   |      |



