



REQUEST FOR QUOTATION

The Philippine Statistics Authority (PSA) through its Bids and Awards Committee (BAC) will undertake Shopping as Alternative Modes of Procurement in procuring Supplies for PhilSys Step 2 Registration & Printable PhilID for April-June 2024 of PSA Camarines Norte with the following details:

Name of Project	Procurement of supplies for PhilSys Step 2 Registration & Printable PhilID for April-June 2024
Solicitation	2024-04-035-CN
Location	PSA Camarines Norte Provincial Statistical Office
Brief Description	(See Bid Form, Page 2)
Quantity	(See Bid Form, Page 2)
Approved Budget for the Contract (ABC)	Php 21,031.00
Contract Duration	within 10 days upon receipt of PO by supplier

Please quote your **Lowest Price** on the item/s listed below and submit your **SEALED QUOTATION** not later than **10:00 am on May 7, 2024** at **PSA Camarines Norte, 2F LJR Bldg. III, J. Lukban St. cor. Carlos II St. Barangay III, Daet, Camarines Norte.**


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 (Minimum)	Unit	Qty	Unit Price	Total Amount (VAT inclusive)	Compliance with Technical Specifications (please check)	
					YES	NO
Procurement of supplies for PhilSys Step 2 Registration & Printable PhilID for April-June 2024						
Lot 1 (ABC=PhP 7,124.00)						
Bond paper, A4, 80 gsm	ream	5	P_____	P_____	()	()
Bond paper, A4, 100 gsm	ream	5	P_____	P_____	()	()
Sticky Note 2"x3"	pad	2	P_____	P_____	()	()
Trash bag, plastic, black, large, 10s	roll	6	P_____	P_____	()	()
Scissors, symmetrical, blade length, 65mm min	pair	5	P_____	P_____	()	()
Correction tape, 10 meters	pc	20	P_____	P_____	()	()
Double sided tape, 1 inch	pc	10	P_____	P_____	()	()
Clipboard, vinyl, A4	pc	5	P_____	P_____	()	()
Ballpen, black	pc	48	P_____	P_____	()	()
Sign pen 0.5	pc	12	P_____	P_____	()	()
Battery, dry cell, size AA, 2 pcs per blister pack	pack	5	P_____	P_____	()	()
Lot 2 (ABC = PhP 11,407.00)						
Alcohol, 70% ethyl, 500ml	bottle	25	P_____	P_____	()	()
Toilet bowl cleaner, 1000ml	bottle	3	P_____	P_____	()	()
Fabric conditioner, 1000ml	bottle	3	P_____	P_____	()	()
Soft broom (walis tambo)	pc	2	P_____	P_____	()	()
Disinfectant spray, 480ml	bottle	2	P_____	P_____	()	()
Sponge with foam, ordinary	pc	6	P_____	P_____	()	()
Toilet tissue paper, 2 ply, 12s per pack	pack	15	P_____	P_____	()	()
Microfiber cloth, 12s	pack	5	P_____	P_____	()	()
Detergent powder, 1000g	pouch	2	P_____	P_____	()	()
Dishwashing liquid, 250ml	bottle	5	P_____	P_____	()	()
Sodium Hypochlorite, approx. 4 liters	gallon	2	P_____	P_____	()	()
Lot 3 (ABC = PhP 2,500.00)						
Canon Toner, Cartridge 325 For official use of PSA Camarines Norte xxxxx	pc	1	P_____	P_____	()	()
			Total	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

Printed Name and Signature of Convasser: _____