



REQUEST FOR QUOTATION
SHOPPING 52.1 (b)

Date: November 24, 2020
PR No: GF-20-03-00574

Name of Company : _____
Address : _____
Contact No. : _____

Project Title : **PROCUREMENT OF VARIOUS LAUNDRY SUPPLIES**

Approved Budget for
the Contract : **Php 433,928.15**

End-User /
Implementing Office : **QUEZON CITY GENERAL HOSPITAL**

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided. Submit your quotation duly signed by you or your duly authorized representative not later than **November 27, 2020 10:00 a.m.** Philippine Standard Time, together with the following documents of your company:

- 1 PhilGEPS certificate (not expired on the time of opening of quotations);
- 2 Business Registration (DTI/SEC)
- 3 Mayor's/Business Permit (2020);
- 4 Tax Clearance; and
- 5 Omnibus Sworn Statement prescribed by the **QC BAC- Goods and Services**
- 6 Income/Business Tax Return (for FY 2019) (For ABC P500,000.00 above)
- 7 If applicable, the JVA in case the joint venture is already in existence, or duly notarized statements from all the potential joint venture partners stating that they will enter into and abide by the provisions of the JVA in the instance that the bid is successful.

in a **SEALED LONG BROWN ENVELOPE** shall:

- 1 Contain the Project Name and PR Number of the contract to be bid in capital letters;
- 2 Bear the name and address of the Bidder in capital letters;
- 3 Be addressed to the Procuring Entity's BAC.

Project Title: **PROCUREMENT OF VARIOUS LAUNDRY SUPPLIES**
Quezon City Local Government
BIDS AND AWARDS COMMITTEE
2/F Procurement Department, Finance Building
Quezon City Hall Compound

For any clarification you may contact us at 89884242 loc. 8505/8709.


ATTY. DOMINIC B. GARCIA
Officer-In-Charge/Head, BAC Secretariat

TERMS AND CONDITIONS

1. Bidders shall **provide correct and accurate** information required in this form.
2. Price quotation/s must be valid for a period of thirty (30) calendar days from the date of submission.
3. Price quotation/s, to be denominated in Philippine Peso shall include all taxes, duties and/or levies payable.
4. Quotation **exceeding** the Approved Budget for the Contract (ABC) shall be **rejected**.
5. Award of contract shall be made to the lowest quotation (for goods) or the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
6. Any interlineations, erasures or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.
7. The City General Services Department (CGSD) shall have the right to inspect the goods.
8. Non-submission of eligibility documents shall mean disqualification of Quotation.
9. Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. CGSD 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 open to it.
10. Failure to follow these instructions will disqualify your entire quotation.

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s as follows:

ITEM NO.	ITEM & DESCRIPTION	UNIT OF ISSUE	QTY.	UNIT PRICE	ITEM TOTAL
1	Apron Made of tetoron cloth, colon green, gray or black	pcs	3		
2	Fabric conditioner 1000ml per pouch	pouch	500		
3	Laundry gloves Rubberize, size 7" or 7 1/2	pairs	15		
4	Liquid bleach for white linen 4 liter per gallons	gals	700		
5	Liquid bleach for colored linen, 900ml per bottle	bottles	500		
6	Liquid soap, 1 liter	bottle	400		
7	Face mask Ear loop, 3ply, 50 pcs per box	boxes	5		
8	Hygienic hand wiping paper towel/ multi-fold towel white 24cm x 23cm, 250 sheets per pack	packs	24		
Total Quoted Amount					

Amount in Words: _____

Delivery Period : Thirty (30) Calendar Days
 Warranty : _____

 Signature over printed name

 Office Telephone No./Fax/Mobile No.

 Date

 Email Address