



Republic of the Philippines
QUEZON CITY GOVERNMENT
BIDS AND AWARDS COMMITTEE
2nd Floor, Procurement Department,
Finance Building, Quezon City Hall Compound



REQUEST FOR QUOTATION
SMALL VALUE PROCUREMENT
(SECTION 53.9)

Date : November 28, 2019
RFQ No. : 19-W4-1012

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : **Purchase of Non-Accountable Forms - Certificate of Birth, Fetal Death and Death**
Approved Budget
for the Contract : **Php99,600.00**
End-User /
Implementing
Office : **Novaliches District 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 **December 3, 2019, Tuesday, 9 a.m.** Philippine Standard Time, together with the following documents of your company:

- 1 Mayor's/Business Permit (2019);
- 2 PhilGEPS certificate (not expired on the time of opening of quotations);
- 3 Income/Business Tax Return (for FY 2018), for ABCs above P500,000.00; and
- 4 Omnibus Sworn Statement prescribed by the Government Procurement Policy Board (GPPB).

in a **SEALED LONG BROWN ENVELOPE** indicating the project title and address as indicated below:

Project Title : **Purchase of Non-Accountable Forms - Certificate of Birth, Fetal Death and Death**
Quezon City Local Government
BIDS AND AWARDS COMMITTEE
2/F Procurement Department, Finance Building
Quezon City Hall Compound

Additional Instructions:

- 1 Affix the signature of your company representative on the sealed envelope flap.
- 2 Only the project name and address should be written / printed on the envelope.

For any clarification, you may contact us at 89884242 loc. 8505/8506.

(Sgd.) ROWENA T. MACATAO
BAC-Goods Chairperson

TERMS AND CONDITIONS

1. Bidders shall **provide correct and accurate** information required in this form in black ink only.
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 Office (CGSO) shall have the right to inspect and/or to test the goods and confirm their compliance to the technical specifications.
8. Non-submission of eligibility documents shall mean disqualification of Quotation.
9. After delivery and upon the submission of the required supporting documents, i.e. sales invoice and/or billing statement, by the contractor, the Quezon City Local Government shall make payment through check in favor of the contractor.
10. 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. CGSO 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.
11. 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:

QUOTATION								
Summary of Approved Budget				Total Offered Quotation				
Item Description (Technical Specifications)				Quantity	Unit of Measure (UOM)	<i>(Inclusive of taxes and fees)</i>		
				Unit Cost	ABC Amount	Vendor's Unit Price	Vendor's Amount	
1	Certificate of Birth (Municipal Form No. 102) 2pc/set, 25 set/pad, duplicate, color green			400	pad	240.00	96,000.00	
2	Certificate of Fetal Death (Municipal Form No. 103A) 2pc/set, 25 set/pad, duplicate, color white			10	pad	240.00	2,400.00	
3	Certificate of Death (Municipal Form No, 103) 2pc/set, 25 set/pad, duplicate, color white			5	pad	240.00	1,200.00	
	-----Nothing Follows-----					TOTAL:	99,600.00	TOTAL:

REMARKS:

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address