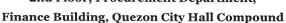


## Republic of the Philippines **QUEZON CITY GOVERNMENT**

**BAC-Goods and Services** 2nd Floor, Procurement Department,





## **REQUEST FOR QUOTATION** SHOPPING 52.1b

		Date: PR No.:	MAY 2 5 2021 GF-20-03-00466F
Name of Company			
Address	:		
Contact No.			
Project Title	:	PROCUREMENT OF BODY CAMERA AND INFRARED THERMOME	TER
Approved budget of the Contract	:	P 88,650.00	
End-User / Implementing Office	:	QUEZON CITY VETERINARY DEPARTMENT	

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 10:00 MM Philippine Standard Time, together with the following documents of your company:

- PhilGEPS certificate (not expired on the time of opening of guotations); 1
- 2 Business Registration (DTI/SEC)
- 3 Mayor's/Business Permit (2021);
- 4 Tax Clearance; and
- Omnibus Sworn Statement prescribed by the QC BAC- Goods and Services 5
- 6 Income/Business Tax Return (for FY 2020) (For ABC P500,000.00 above)
- 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:

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

Project Title: PROCUREMENT OF BODY CAMERA AND INFRARED THERMOMETER

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. 8506/8709.

ATTY. DOMINIC B. GARCIA Officer-In-Charge/Head, BAQ 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 initialed 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	BODY CAMERA, capacity 32 GB, with infrared LED, full HD 1080p 5hrs battery life, 30fps framerate, high sensitivity image sensor, view angle: 130 deg.	unit	6		
2	INFRARED THERMOMETER, digital infrared thermometer, laser IR temperature instant-read with 2AAA batteries (included) Emissivity 0.95 (fixed) Range-50 to 380°C (-58 to 716°F)	unit	3 al Quo	ted Amount	

STATE OF THE STATE			
THER REQUIREMENT:			
Statement of Warranty - minimum of or	ne (1) year		
	Delivery Period	:	Thirty Five (35) calendar days
	Warranty		
	Trainaine,		
			Signature over printed name
			Office Telephone No./Fax/Mobile No.
			Date
			Email Address

Amount in Words: