

## Quezon City Government PROCUREMENT DEPARTMENT

2nd Floor Finance Building, Quezon City Hall, Central, Quezon City Tel No. 988-4242 loc 8709 / 8710 / 8711



## **NOTICE OF AWARD**

<b>PROJ</b>	<b>ECT</b>	NO.
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: SSDD-22-PCP1-924

**END USER** 

: SOCIAL SERVICES DEVELOPMENT DEPARTMENT

PROJECT TITLE

: PROCUREMENT OF HYGIENE KIT

Notice is h	nereby given to	Rhea H. Quintos	dba	R. QUINTOS E	NTERPRISES JOINT VENT	URE WITH VERSAFLEX PHAI	RMA
with busin	ess address locate	d at Margar	ta Bldg., #28 Matalino	St., Barangay Ce	entral, Quezon City	, that its bid offer	for the
above me	intioned project in the	ne amount of	One Million Th	ree Hundred Fifty	/-Five Thousand Seven Hui	ndred Sixty Pesos Only	<del></del>
		·	<u>-</u>	-	•	nts and conditions pres	
						C - BAC - Goods and	
the Quezo	on City Government	contract and to guar must be posted with forms with the corre	in a non-extend	able period o	ne project, the Perfo f ten (10) calendar d	rmance Security payal lays from receipt of thi	ole to s
Form of Performance Security					Amount of Performance Security (Equal to Percentage of the Total Contract Price)		
а	Cash or cashier's/n Commercial Bank.	nanager's check issued					
b	Bank draft/guarantee or irrevocable letter of credit issued by a b Universal or Commercial Bank; Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank.				Five Percent (5%)		
с	Surety bond callable upon demand issued by a surety or insurance				Thirty Perc	ent (30%)	
d	d Any combination of the foregoing.				Proportionate to s respect to total a	shareof form with mount of security	
1. Forfeitu 2. Disqual 3. Upon ce day and ne	ire of the bid securi lification from partic onviction, the releva ot more than fifteer etermination of adn on.	ipating in the bidding ant officers or individ	at hand. uals will suffer th rough blacklistin	ne penalty of	imprisonment of not gs it will suffer core	less than six years an	id 1
oigned ti		.01	, Que20	on City, Metro	A. JOSEFINA G.	BELMONTE	
		ACKNOWLE	بب	CEIPT AND	CONFORME		
		Signatu R. QUINTOS ENTERI	QUI LITOS re Over Printed Na PRISES JOINT VEN		Date  ERSAFLEX PHARMA		
		Representative			200 045 400 000	170 700 450 050	
		Designation			239-845-193-000/ 1 TIN Nur		
	0926	6814502			1114 1441		

Telephone Number