



REQUEST FOR QUOTATION
NEGOTIATED 53.9
SMALL VALUE PROCUREMENT

DATE : JULY 11, 2023 ✓

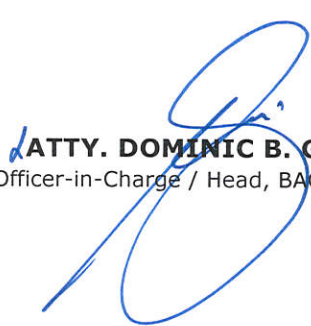
PROJECT NO. : CPO-23-OEPA-0313B ✓

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : REPAIR AND MAINTENANCE OF OFFICE EQUIPMENT ✓
Approved Budget of the Contract : Php43,975.00 ✓
End-User / Implementing Office : CITY PROSECUTOR'S OFFICE ✓

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 **JULY 14, 2023, 10:00 AM** 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 (2023); ✓
- 4 Tax Clearance; and
- 5 Omnibus Sworn Statement prescribed by the **QC BAC- Goods and Services**
- 6 Income/Business Tax Return (for FY 2022) (For ABCs above P500,000.00)
- 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** issued by **QC BAC- Goods and Services**.


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

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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	REPAIR AND MAINTENANCE OF OFFICE EQUIPMENT One (1) piece - Door Switch Cover for Fuji Xerox DCS2320/2520 One (1) set - Door Lock (side cover) Fuji Xerox DCS2320/2520 Eight (8) sets - Pick-up roller and retard for Fuji Xerox DCS2011 Fifty (50) pieces - Pick-up Feed Pad Roller for Epson L120 Fifty (50) pads - Waste Ink Pad for Epson L120 (pad only)	lot	1		
TOTAL:					

Amount in Words: _____

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

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address

Other Requirement/s:
Statement of Warranty - minimum of six (6) months.

stg

Cost Derivation

PROJECT NAME: REPAIR AND MAINTENANCE OF OFFICE EQUIPMENT
PROJECT NO. CPO-23-OEPA-0313B

	PARTICULAR	UNIT OF ISSUE	QUANTITY	UNIT COST	TOTAL
1	Door Switch Cover for Fuji Xerox DCS2320/2520	piece	1		
2	Door Lock (side cover) Fuji Xerox DCS2320/2520	set	1		
3	Pick-up roller and retard for Fuji Xerox DCS2011	set	8		
4	Pick-up Feed Pad Roller for Epson L120	piece	50		
5	Waste Ink Pad for Epson L120 (pad only)	pad	50		
TOTAL QUOTED AMOUNT:					

I hereby certify to comply and deliver all the above requirements.

Name: _____

Legal Capacity: _____

Signature: _____

Duly authorized to sign the Quote for and behalf of: _____