



**REQUEST FOR QUOTATION
NEGOTIATED PROCUREMENT
(SECTION 53.9 – SMALL VALUE PROCUREMENT)**

DATE : SEPTEMBER 26, 2023

PROJECT NO. : ITDD-23-SERVICES-1007

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : OFFICE APPLICATION SUITE PACK FOR STUDENT, FACULTY AND STAFF
Approved Budget of the Contract : P 918,072.00
End-User / Implementing Office : INFORMATION TECHNOLOGY DEVELOPMENT DEPARTMENT (QUEZON CITY UNIVERSITY)

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 **SEPTEMBER 29, 2023, 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 (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**.


DATTY. 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	<p>Office Application Suite Pack</p> <ul style="list-style-type: none"> • Microsoft Teams for Education • Microsoft Stream • One Drive • Share Point • Microsoft Forms • Office Desktop Application • Outlook and Exchange Online • Microsoft Planner • Yammer • Lists <p>Functionality</p> <ul style="list-style-type: none"> • Collaboration and Communication Platform • Video Content Platform • Personal Cloud Storage – 115TB Total Pooled Storage • Shared Cloud Storage • Online Assessment, Feedback, and Data Gathering Tool • Productivity Tools for Collaboration • Email Service • Digital Planner for Workload and Progress Monitoring • Social Media Platform 	License	300		

	<ul style="list-style-type: none"> Logs Management Tool 				
	Project Duration shall be for One (1) year period and can be accessed within fifteen (15) days upon issuance of Notice to Proceed (NTP)				
	TOTAL				

Amount in Words: _____

Delivery Period : Fifteen (15) Calendar

Warranty : _____

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address