



REQUEST FOR QUOTATION SHOPPING – SECTION 52.1B

DATE : OCTOBER 17, 2023

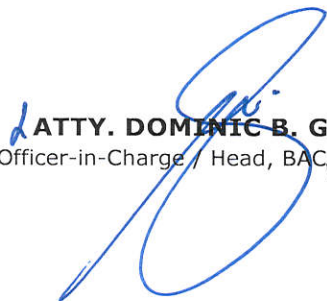
PROJECT NO. : ASC-23-SOP-1121E

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : PROCUREMENT OF RAIN BOOTS AND OTHERS
Approved Budget of the Contract : P 64,686.00
End-User / Implementing Office : Amoranto Sports Complex

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 **OCTOBER 20, 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.


ATTY. DOMINIC B. GARCIA
Officer-in-Charge / Head, BAC-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	First Aid Kit, 107 pieces for up to 25 persons, Plastic case with dividers, adhesive plastic bandage, large fingertip bandage, knuckle fabric bandage, triangular sing with safety pins, gauze dressing pads, gauze roll bandage, trauma pad, antiseptic cleansing wipes, antibiotic ointment packs, sterile pad, insect sting relief pads, eye wash, first aid tape rolls, instant cold compress, aspirin tablets, scissors, tweezers plastic, gloves	Set	10		
2	Safety Helmet, with vents and chin strap, Weight 380g, 4-point suspension	Piece	10		
3	Safety Goggles with Lightweight PVC Frame and High Impact Polycarbonate	Piece	10		
4	Full Body Harness, 1 attachment point, 4 adjustment point, made of high strength Polyester, 13mm* 1.5m rope	Piece	4		
5	Rain Boots, waterproof rubber PVC non slip protective, deep angle cleated outsole, contoured heel cup	Pair	20		
6	Rain Coat Poncho Type, reflectorized, double sided, sealed joints and rubberized inside, Free Size	Piece	20		
TOTAL					

Amount in Words: _____

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

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address