

## REQUEST FOR QUOTATION

## **INSTRUCTIONS:**

- 1. Bidder shall read the instructions and fill all the blanks properly.
- 2. Prospective Bidder shall submit its bid proposal using this form or official quotation with Company's letterhead.
- 3. Any specifications other than required/stated in this form shall not be considered in the evaluation of bid.
- 4. Quotation must be the lowest and responsive price, taxes included for the item/services listed hereunder, including delivery charges unless otherwise specified.
- 5. If applicable, offered brand name and model shall be specified.
- 6. Bid proposal shall be valid for one hundred twenty (120) calendar days from the date submitted.
- 7. Bid proposal shall be submitted manually on or before the deadline to the Bids and Awards Committee Secretariat office at BSWM, SRDC Bldg., Elliptical Road corner Visayas Avenue., Quezon City or elctronically through procurement@bswm.da.gov.ph.
- 8. Late Bids will not be accepted.
- 9. Please be informed that all Documentary requirements must be submitted and attached to the quotation. Non-compliance to the requirements will be automatically disqualified.

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FOR SMALL VALUE PROCUREMENT:
PhilGEPS registration number or Certificate
Mayor's Permit (Line of business should at the very least be similar to the project to be Bid )
Revised Notarized Omnibus Sworn Statement (for total ABC above PhP50K) validity within 3 months upon submission
□ Latest ITR (for total ABC above PhP500K)

PCAB License (for Infrastructure Project)
Curriculum Vitae and Professional Licenses (for Consulting Services)

Copy of LTFRB (Franchise) for Vehicle Rental

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□NFCC (Infra)						
TERMS OF REFERENCE:						
Type of Procurement: Goods/Services						
Mode of Procurement: Small Value						
Deadline for Submission of Bids (Date and Time): June 11, 2024 at 12:00 pm						
PR No.: <u>2024-05-0883</u>	End-User: HILLPEZ	Total ABC: 31,600.00				
	Term of Payment: Upon completion of delivery/services and					
Source of Fund: RD VERMI HILLPEZ	submission of documentary requirement per accounting and auditing					

## Delivery Requirements: STRICTLY within 30 Calendar Days upon receipt of P.O (Note: Extension shall not not be accepted/entertained except on meritorious ground & Late delivery shall be liable for liquidation damages)

	Unit	Item (Description and Specification)	ABC	Offered	Statement of Compliance (Comply/ Not Comply)		Bid
Qty			Unit Cost	Brand		Unit Price	Total Price
	lot	FIELD SUPPLIES					
35	pair	Thick Rubber Boots (unisex) Light Weight, High Tube, High Cut, Waterproof, Non-slip Sizes: 5= 3 paairs 6 = 5 pairs 7 = 5 pairs 8 = 10 pairs 9 = 7 pairs 10 = 5 pairs Color: Gray or Blue	400.00				
24	pair	Working Gloves Breathable, Scratch-Resistant (Unisex), Garden Rubber Hand Gloves Gloves Length: Wrist Material: Polyester Color: Red with Black Size: S - 2; M-5; L-17	350.00				
24	pair	Labor Cloth Hand Gloves Cotton Yarn Knit Protection Color: White Size: S-2; M-5; L-17	250.00				
12	pair	Work Safety Goggles Anti-Splash Eye Protection ,Windproof, Dustproof Protective Glasses Optical Lens Frame Color: Black/Blue Frame Width: 15 cm Frame Length: 13.9cm -15 cm Lens height: 5.5 cm	100.00				
20	pair	Arm Sleeves (Unisex) Sunscreen UV Protection Material: Polyester Color: Assorted (except Black)	100.00				

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	Delivery Site: BSWM-NSWRRDC HILLPEZ, KM 53,					
	Brgy. Cuyambay, Tanay, Rizal					
NOTE:						
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NOTE: ALL PRIC	CES ARE INCLUSIVE OF VAT AND CHARGES	-1	1	ı		<u> </u>
NOTE:	ACCOMPLISHED REQUEST FOR QUOTATION (RFQ) SHOULD DEADLINE FOR SUBMISSION OF BIDS. RFQ's SUBMITTED A ACCEPTED.					
Reviewed by:						
iterieweu by:	Procurement Coordinator	_				
	Signature Over Printed Name					
For the Bids an	d Awards Committee:					
	(Sgd) FRANCE JOSEPHINE C. BAUTISTA	_				
•	Head, BAC Secretariat					
	ireau, brie secretariat					
		C	anvasser (Sig	nature over Pi	rinted Name	)
DBM-PhilGEPS	Posted					
		Date of c	anvass:			
Posted by:						
	(Sgd) GINA M. ALBERTO DBM-PhilGEPS Posted					
To: The BSWM	Bids and Awards Committee (BAC)					
Sir/Madam:						
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We, her	eby certify that we will abide and comply with the te	chnical specifica	tions and deli	very requiren	nents stated	above.
Signature	over Printer Name	Name of Compa	ny		TIN Number	r
Telephon	e Number(s)	Address			Date Accom	plished
Please ch	neck the box for your mode of submission:					
	Manual submission (through BSWM canvasser)					
	Email/ BSWM Drop Box					