



Republic of the Philippines
CITY GOVERNMENT OF TABACO
OFFICE OF THE BIDS & AWARDS COMMITTEE
REQUEST FOR QUOTATION / PROPOSAL
NP-Small Value Procurement (Section 53.9)

Date: _____
 Office / End-User: City Vice Mayor's Office/Office of the City Secretary (VMO-SSP)

RFQ No. 0808-2020 P.R. No. 20-11-1591

COMPANY NAME: _____
 ADDRESS: _____
 TEL. NO./CP NO.: _____

	TERMS AND CONDITIONS
<p>To whom it may concern:</p> <p>Please quote your lowest price/s on the lot or item/s below, subject to Terms and Conditions indicated herein, stating the shortest time of delivery and submit your quotation duly signed by your official representative not later than 9:00 A.M. of _____ to the BAC Office, 2F Annex Bldg., Tabaco City Hall, Tabaco City.</p> <p>1st Extension _____ Very truly yours, 2nd Extension _____</p> <p style="text-align: center;">ALWIN O. NUNEZ Procuring Officer</p>	<ol style="list-style-type: none"> 1. All entries must be typewritten and legible; 2. Bidders must submit the following DOCUMENTARY REQUIREMENTS: <ul style="list-style-type: none"> a.) Mayor's / Business Permit b.) BIR Certificate of Registration c.) Professional License / Curriculum Vitae (Consulting Services) d.) PhilGEPS Registration Number: _____ e.) PCAB License (Infra Projects) f.) Income / Business Tax Return (For ABCs above P500K) g.) Omnibus Sworn Statement (For ABCs above P50K) 3. Place your proposal together with the documents in a sealed envelope and type the ff. details on the face of the envelope: <ul style="list-style-type: none"> Your Company / Name & Address PhilGEPS Reference No. & PR No. Solicitation No. Closing date and time <p style="text-align: center;">(Note: WE DO NOT ACCEPT PROPOSAL/QUOTATION SUBMITTED THROUGH E-MAIL)</p> <ol style="list-style-type: none"> 4. Delivery period must be at least within ten (10) calendar days upon receipt of the Notice of Award/Purchase Order (PO) or Contract. 5. Item/s delivered must have warranties for the unit replacements, parts, labor or other services. 6. Price validity shall be for a period of three (3) months. 7. Quoted price must be inclusive of taxes, and other charges or fees and shall not exceed the Approved Budget for the Contract (ABC). 8. Brand and/or model of items offered shall be indicated across the applicable items. Brochure may also be attached to the proposal. 9. Bid Proposal should be duly signed by the authorized representative. 10. Transaction with the City Government of Tabaco shall mean compliance by the winning bidder with the bid and delivery requirements before the issuance of check payment. 11. Failure to comply with these conditions shall mean disqualification of your bid proposal.
<p>CANVASSER'S CERTIFICATION</p> <p>This is to certify that I have full knowledge, authority and responsibility in distributing and / or collecting the Request for Quotation in accordance with the guidelines in securing prices for the City Government of Tabaco.</p> <p style="text-align: center;">_____ (Signature over Printed Name) Authorized Canvassers</p>	

Project Name:	Publication of the City Ordinance	SUPPLIER / CONTRACTOR / CONSULTANT'S PROPOSAL BOX
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No.	ITEM DESCRIPTION <small>(Item Name & Technical Specifications)</small>	Qty	Unit	Approved Budget of the Contract (ABC)	Financial Proposal <small>(Indicate the Price Offer)</small>		Technical Proposal <small>(Indicate Brand / Model Offer)</small>
					Unit Price	Total Price	
					1	Publication of the City Ordinance No. 022-2020, entitled: AN ORDINANCE AMENDING SECTIONS 2, 3 AND 4(b) OF CITY ORDINANCE NO. 007 SERIES OF 2020 OTHERWISE KNOWN AS THE "COVID-19 PREVENTION AND MITIGATION ORDINANCE OF TABACO CITY".	
TOTAL (Php):				71,820.00			

Delivery Period: _____ **Warranty:** _____

SUPPLIER / CONTRACTOR / CONSULTANT'S CERTIFICATION

Date: _____

After having carefully read and accepted your General conditions, I / We quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in _____ days from receipt of the Notice of Award.

Signature over Printed Name of the authorized representative: _____

Telephone No / Mobile No.: _____