



Republic of the Philippines  
Department of Justice  
**BUREAU OF CORRECTIONS**  
City of Muntinlupa



## **REQUEST FOR QUOTATION**

Date: \_\_\_\_\_  
RFQ No.: **19-03-026**

Name of Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of Store/Shop: \_\_\_\_\_  
Address: \_\_\_\_\_  
Business Permit No.: \_\_\_\_\_  
TIN No.: \_\_\_\_\_  
PhilGEPS Registration No.: (required) \_\_\_\_\_

Please quote your best offer for the item/s described below, subject to the Terms and Conditions as stated hereunder.

- a.) Bidders shall provide correct and accurate information required in this form.
- b.) Bidders must quote for all the items.
- c.) Price quotation/s must be valid for a period of *One Hundred Twenty (120) calendar days* from the date of submission.
- d.) Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable.
- e.) Quotations exceeding the Approved Budget for the Contract shall be rejected.
- f.) Award of contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
- g.) Any alterations, erasures or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.
- h.) The item/s shall be delivered within **Fifteen (15) calendar days** from receipt of approved purchase order.
- i.) The BuCor shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- j.) Liquidated damages equivalent to one tenth of one percent (0.1%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The BuCor 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.
- k.) Bidders shall submit the required documents together with their bid price in a sealed envelope.
- l.) **Submission thru e-mail and fax quotation will not be entertained/accepted. Sealed quotation thru mail or submit it personally.**

### **REQUIREMENTS TO BE SUBMITTED**

- m.) Certified True copy of Valid & Current Mayor's/Business Permit
- n.) Certified True copy of Valid & Current PhilGEPS Registration Number

### **NOTE:**

**BIDDERS STATEMENT OF COMPLIANCE ON THE TERMS & CONDITIONS AND REQUIREMENTS AS STATED ABOVE**

\_\_\_\_\_  
Signature over Printed Name  
Sole Proprietor or Authorized Representative

Submit your sealed quotation duly signed by you or your duly representative not later than **August 15, 2019** at the BAC Office, Bureau of Corrections at **1:00 P.M.** Late submission of bids shall be rejected. For further information, you can call the BAC Secretariat c/o WILLIAM M. TERRADO at the Supply Office, Bureau of Corrections, Muntinlupa City at Tel # 809-8587/478-0907 from 8:00 am to 5:00pm, Monday to Friday

  
**CTCSUPT. MA. LOURDES M. RAZON, MD**  
Chairperson, Bids and Awards Committee

After having carefully read and accepted the Terms and Conditions, I/we submit our quotation/s for the item/s as follows:

**REQUEST FOR QUOTATION # 19-03-026**

<b>Procurement Project</b>	<b>Approved Budget for the Contract (ABC)</b>
<b>Supply and Delivery of Materials for the Obliteration of Gang Marks</b>	<b>Two Hundred Seventy Thousand Three Hundred Sixty Pesos Only (Php 270,360.00)</b>

QTY	UNIT	DESCRIPTION	Compliance to the Technical specifications (Please check)		Approved Budget of the Contract (ABC)	Offered Quotation (per unit)	Offered Quotation (total)
			YES	NO			
144	Tube	NEEDLE 9 RL			86,400.00		
144		NEEDLE 13 FS			86,400.00		
144		DISPOSABLE 9 RL TIPS			43,200.00		
144		DISPOSABLE 13 FS TIPS			43,200.00		
2		INK (12 OUNCE)			5,400.00		
72		INK CUP			5,760.00		
<b>TOTAL</b>					<b>270,360.00</b>		

\_\_\_\_\_  
SIGNATURE OVER PRINTED NAME OF SOLE PROPRIETOR OR REPRESENTATIVE  
POSITION/DESIGNATION: \_\_\_\_\_  
OFFICE TELEPHONE NO: \_\_\_\_\_  
MOBILE PHONE NO./FAX NO.: \_\_\_\_\_  
EMAIL ADDRESS/ES: \_\_\_\_\_