



**REQUEST FOR QUOTATION
(Small Value Procurement) (3rd Posting)**

Company Name : _____ Date: _____
Address : _____ Quotation No. CWD 75-2020
_____ End-User: Production Department
Tel. No./Fax No. : _____
T.I.N. : _____

Please quote your lowest price on the item(s) listed, subject to the Terms and Condition stated below and in a sealed envelope submits your quotation duly signed by authorized representative;

Activities	Date and Time	Place / Venue
Opening of Requests for Quotation	November 05, 2020 @ 10:00am	2 nd floor CWD Warehouse Building, Lakeview Subdivision, Barangay Halang Calamba City


MR. EDWIN L. CARTAGO
BAC Chairman

TERMS AND CONDITIONS:

1. ALL ENTRIES SHALL BE TYPEWRITTEN
2. COMMENCEMENT SHALL BE FOR A PERIOD OF **ONE (1) TO FOUR (4) WEEKS** UPON RECEIPT OF THE APPROVED PURCHASE ORDER.
3. PRICE VALIDITY SHALL BE FOR A PERIOD OF THIRTY (30) CALENDAR DAYS
4. THE APPROVED BUDGET FOR THE CONTRACT IS AMOUNTING TO **Php 116,395.00** (BID EXCEEDING THE ABC SHALL BE AUTOMATICALLY DISQUALIFIED)
5. ALL PAGES OF THE SUBMITTED DOCUMENTS MUST BE SIGNED BY THE AUTHORIZED REPRESENTATIVE/S
6. ANY MISSING DOCUMENT IS A GROUND FOR DISQUALIFICATION
7. ELECTRONIC SUBMISSION IS NOT ALLOWED

DOCUMENTARY REQUIREMENTS SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION:

1. PHILGEPS CERTIFICATE OF PLATINUM MEMBERSHIP
2. Registration Certificate (SEC) / DTI Certificate
3. Mayor's/Business Permit or its Equivalent
4. Tax Clearance
5. Audited Financial Statements
 - Auditor's Certificate
 - Income Statement
 - Balance Sheet
 - Notes to Financial Statement
6. Latest six (6) month's income tax returns filed and paid through the BIR Electronic Filing and Payment System (eFPS)
7. Latest six (6) month's business tax returns (VAT Payments) filed and paid through the BIR Electronic Filing and Payment System (eFPS)
8. OMNIBUS SWORN STATEMENT (as per RA 9184 Standard Format)

Item no.	ITEM & DESCRIPTION/ TECHNICAL SPECIFICATION	QTY.		UNIT AMOUNT	TOTAL AMOUNT
	Calibration and Preventive Maintenance of Various Laboratory Equipment, Bio-Safety Cabinet Including the Repair and Maintenance of Autoclave:				
	1. Calibration of Laboratory Equipments				
1	Incubator	2	Units	2,112.00	4,224.00
2	Precision Water Bath	1	Unit	2,112.00	2,112.00
3	Autoclave	1	Unit	6,720.00	6,720.00
4	Digital Weighing Balance	1	Unit	2,112.00	2,112.00
5	Colony Counter	1	Unit	3,000.00	3,000.00
6	Programmable Peristaltic Pump	1	Unit	4,400.00	4,400.00
7	Pharma Refrigerator	1	Unit	2,112.00	2,112.00
8	pH Meter	1	Unit	4,415.00	4,415.00
9	Conductivity Meter	1	Unit	4,800.00	4,800.00
10	Bio-Safety Cabinet	1	Unit	15,000.00	15,000.00
	2. Preventive Maintenance of Laboratory Equipments				
11	Incubator	2	Units	3,000.00	6,000.00
12	Precision Water Bath	1	Unit	3,000.00	3,000.00
13	Autoclave	1	Unit	6,500.00	6,500.00
14	Digital Weighing Balance	1	Unit	3,000.00	3,000.00
15	Colony Counter	1	Unit	3,000.00	3,000.00
16	Programmable Peristaltic Pump	1	Unit	5,000.00	5,000.00
17	Pharma Refrigerator	1	Unit	3,000.00	3,000.00
18	pH Meter	1	Unit	4,000.00	4,000.00
19	Conductivity Meter	1	Unit	4,000.00	4,000.00
20	Bio-Safety Cabinet	1	Unit	15,000.00	15,000.00
21	3. Autoclave Repair ---nothing follows---	1	Unit	15,000.00	15,000.00
APPROVED BUDGET FOR THE CONTRACT Php					116,395.00

Brand and Model : _____
Delivery Period : _____
Warranty : _____
Price Validity : _____

After having carefully read and accepted your General Conditions, I/We quote on the item(s) at prices noted above.

Printed Name/Signature/Date

Tel. No. /Cellphone No./ e-mail address