



REQUEST FOR PROPOSAL

Company Name : _____ Date: _____
Address : _____ Quotation No. CWD 77-2020
Tel. No./Fax No. : _____ End-User: Office of the General Manager
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 proposals duly signed by authorized representative;

Activities	Date and Time	Place/Venue
Opening of Proposal (Bid)	November 05, 2020 @ 03:30 pm.	2 nd Floor CWD Warehouse Building, Lakeview Subdivision, Barangay Halang Calamba City

Evaluation procedures shall be QUALITY COST BASED EVALUATION (QCBE) - 60% Technical Proposal, 40% Financial Proposal.


MR. EDWIN L. CARTAGO
BAC Chairman

TERMS AND CONDITIONS:

1. ALL ENTRIES SHALL BE TYPEWRITTEN
2. COMMENCEMENT SHALL BE FOR A PERIOD OF **ONE TO FOUR 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 **PHP 160,000.00**
(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 DOCUMENTS 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)

9. CERTIFICATE OF ACCREDITATION FROM PHILIPPINE ACCREDITATION BUREAU (PAB-DTI) OR ITS DULY RECOGNIZE INTERNATIONAL COUNTERPART
 10. CURRICULUM VITAE OF AUDITOR/S.

Item no.	ITEM & DESCRIPTION/ TECHNICAL SPECIFICATION	QTY.		UNIT AMOUNT	TOTAL AMOUNT
1	Supply of Services for ISO 9001:2015 Certification - Quality Management System (QMS) - (Certification – One (1) year) ***nothing follows***	1	lot	160,000.00	160,000.00
Approved Budget for the Contract Php					160,000.00

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