

## Calamba Water District

Lakeview Subdivision, Halang, Calamba, Laguna Tel. Nos. 545-1614; 545-2728; 545-7895; 545-1389; 545-7981; 545-2863 Fax: (049) 545-9752

## REQUEST FOR QUOTATION (Small Value Procurement) (2<sup>nd</sup> Posting)

Company Name	:	Date:
Address		Quotation No. CWD 61-2020
		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 submit your quotation duly signed by authorized representative;

Activities	Date and Time	Place / Venue		
Opening of Requests for	October 20, 2020 @	2 <sup>nd</sup> floor CWD Warehouse Building, Lakeview Subdivision, Barangay		
Quotation	01:00pm	Halang Calamba City		

MR. EDWIN L. CARTAGO BAC Chairman

## TERMS AND CONDITIONS:

- 1. ALL ENTRIES SHALL BE TYPEWRITTEN
- 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
- THE APPROVED BUDGET FOR THE CONTRACT IS AMOUNTING TO Php 378,242.00 (BID EXCEEDING THE ABC SHALL BE AUTOMATICALLY DISQUALIFIED)
- 5. ALL PAGES OF THE SUBMITTED DOCUMENTS MUST BE SIGNED BY THE AUTHORIZED REPRESENTATIVE/S
- ANY MISSING DOCUMENT IS A GROUND FOR DISQUALIFICATION
- 7. ELECTRONIC SUBMISSION IS NOT ALLOWED

## DOCUMENTARY REQUIREMENTS SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION:

- PHILGEPS CERTIFICATE OF PLATINUM MEMBERSHIP
- 2. Registration Certificate (SEC) / DTI Certificate
- 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)

Partial bids are allowed. All Goods are grouped in lots listed below. Bidders shall have the option of submitting a proposal on any or all lots and evaluation and contract award will be undertaken on a per lot basis. Lots shall not be divided further into sub-lots for the purpose of bidding, evaluation, and contract award.

NO.	ITEM & DESCRIPTION/ TECHNICAL SPECIFICATION	QTY.	UNIT	UNIT AMOUNT	TOTAL AMOUNT
	Supply and Delivery of Various an	ry Supplies,			
1	Brilliant Green Bile 500gms	1	Bot.	2,310.00	2,310.00
2	Lauryl Tryptose Broth 500gms	60	Bots	1,780.00	106,800.00
3	Plate Count Agar 500gms	12	Bots	2,563.00	30,756.00
4	EC Broth 500gms	1	Bot.	2,410.00	2,410.00
5	Tryptic Soy Broth	1	Bot.	3,500.00	3,500.00
6	Sodium Thiosulfate 3% 500gms	1	Bot.	1,188.00	1,188.00
7	Durham Tubes (12x35mm)	500	Pcs	44.00	22,000.00
8	Durham Tubes (6x50mm)	100	Pcs	11.00	1,100.00
		170,064.00			
9	Glycerol 40% 500ml	1	Bot.	3,850.00	3,850.00
10	Buffer pH 7 500ml	1	Bot.	1,064.00	1,064.00
11	Buffer pH 4 500ml	1	Bot.	1,064.00	1,064.00
12	Conductivity Standard	1	Bot.	1,000.00	1,000.00
13	Bio-indicator Ampules	1	Box	19,416.00	19,416.00
14	Test Tubes (20x150mm)	500	Pcs	30.80	15,400.00
15	Kim Caps (for 20x150mm T. Tubes)	100	Pcs	9.24	924.00
16	Standard Weight 1000gms	1	Pc	3,000.00	3,000.00
17	Standard Weight 500gms	1	Pc	3,000.00	3,000.00
18	Standard Weight 100gms	1	Pc	3,000.00	3,000.00
19	Rubber Hose (Peristaltic Pump as per sample)	5	Mtrs	500.00	2,500.00
20	Glycine Reagent (24ml/bottle)	6	Bot.	1,680.00	10,080.00
				Lot 2	64,298.00
21	Colilert 18 (200 pcs.)	1	Pack	76,780.00	76,780.00
22	Quanti-Tray 51 Wells (100 pcs)	2	Packs	24,800.00	49,600.00
23	Shrink-Banded Vessel w/ Sodium Thiosulfate 3% (500gms)	1	Box	17,500.00	17,500.00
		143,880.00			
	***nothing fo	llows***			
	APPROVED BUDG	ET FOR T	HE CONTR	RACT Php	378,242.00

Brand and Model	:			
Delivery Period	:			
Warranty	:			
Price Validity	:		_	
After having carefull	y read and accepted you	ur General Condition	ns, I/We quote on the iter	m(s) at prices noted above.
Printed Name/Signa	ture/Date			
Tel. No. /Celiphone I	No./ e-mail address			