



24/7 Public Service

# 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)

Company Name : \_\_\_\_\_ Date: \_\_\_\_\_  
 Address : \_\_\_\_\_ Quotation No. CWD 16-2019  
 \_\_\_\_\_ 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	May 17, 2019 @ 3:00pm	2 <sup>nd</sup> 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 500,000.00** (BID EXCEEDING THE ABC SHALL BE AUTOMATICALLY DISQUALIFIED)
5. ALL PAGES OF THE SUBMITTED DOCUMENTS MUST BE SIGNED BY THE AUTHORIZED REPRESENTATIVE/S

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

1. PHILGEPS CERTIFICATE OF PLATINUM MEMBERSHIP  
 (Documents to be submitted in the absence of Philgeps Certificate of Platinum Membership)
  - a. Registration Certificate (SEC)
  - b. Mayor's/Business Permit or its Equivalent
  - c. Tax Clearance; and
  - d. Audited Financial Statements
2. INCOME AND BUSINESS TAX RETURNS (VAT PAYMENT) LATEST SIX (6) MONTHS
3. OMNIBUS SWORN STATEMENT

Item no.	ITEM & DESCRIPTION/ TECHNICAL SPECIFICATION	QTY.		UNIT AMOUNT	TOTAL AMOUNT
1	<b>Supply and Delivery of Vertical Autoclave (High Capacity)</b> ***nothing follows***	1	Unit	500,000.00	500,000.00
<b>APPROVED BUDGET FOR THE CONTRACT Php</b>					<b>500,000.00</b>

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