

Calamba Water District

Lakeview Subdivision, Halang, Calamba, Laguna Tel. Nos. 545-1614; 545-2728; 545-7895; 545-1389; 545-7981; 545-286 Fax: (049) 545-9752

REQUEST FOR QUOTATION (Small Value Procurement)

Company Name	Miles Cortical L. Dumin	Date:
Address	ingirsion	Quotation No. CWD 32-2018
		End-User: Production Department
Tel. No./Fax No.		
T.I.N.	34 (444.50.)	

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	
Pre-bid Conference	August 10, 2018 @ 10:00am	2 nd floor CWD Warehouse Building, Lakeview Subdivision, Barangay	
Opening of Requests for Quotation	August 17, 2018 @ 10:00am	Halang Calamba City	

ENGR. JOSELITO A. GILLERA 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 Php98,396.00 (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
- 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
	Calibration and Preventive Maintenance of Laboratory Equipment and Biosafety Cabinet	id only the shortery collection a reading to	(Pek (i)) Sepport (est les se week	in theor (3) dray confibered and attendance is one of Occuper 2018	national grant

Item no.	ITEM & DESCRIPTION/TECHNICAL SPECIFICATION	QTY.		UNIT AMOUNT	TOTAL AMOUNT	
	1. CALIBRATION					
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	Programmable Perstaltic Pump	1	Unit	4,400.00	4,400.00	
6	Pharma Refrigerator	1	Unit	2,112.00	2,112.00	
7	pH Meter	1	Unit	4,416.00	4,416.00	
8	Conductivity Meter	1	Unit	4,800.00	4,800.00	
9	Bio-Safety Cabinet	1	Unit	15,000.00	15,000.00	
	2. PREVENTIVE MAINTENANCE					
10	Incubator	2	Units	3,000.00	6,000.00	
11	Precision Water Bath	1	Unit	3,000.00	3,000.00	
12	Autoclave	1	Unit	6,500.00	6,500.00	
13	Digital Weighing Balance	1	Unit	3,000.00	3,000.00	
14	Colony Counter	1	Unit	3,000.00	3,000.00	
15	Programmable Perstaltic Pump	1	Unit	5,000.00	5,000.00	
16	Pharma Refrigerator	1	Unit	3,000.00	3,000.00	
17	pH Meter	1	Unit	4,000.00	4,000.00	
18	Conductivity Meter	1	Unit	4,000.00	4,000.00	
19	Bio-Safety Cabinetnothing follows	1	Unit	15,000.00	15,000.00	
	APPROVED	BUDGET FO	OR THE CO	NTRACT Php	98,396.00	

SCOPE OF WORKS

Calibration and Maintenance of the following equipments:

- 1. Incubator
- 2. Precision Water Bath
- 3. Autoclave
- 4. Digital Weighing Balance
- 5. Colony Counter
- 6. Programmable Peristaltic Pump
- 7. Pharma Refrigerator
- 8. pH Meter
- 9. Conductivity Meter
- 10. Bio-Safety Cabinet

SCOPE:

- > Calibration work should only be One week upon receipt of purchase order (P.O.)
- > On site calibration and maintenance should only last one (1) to three (3) days
- Service report and certification of every laboratory equipment calibrated and maintained must be submitted Fifteen (15) days after calibration and maintenance is completed
- > Schedule of calibration and maintenance is on the last week of October 2018

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	e Validity				
Afte	r having carefully	read and accepted your Genera	Conditions, I/We gu	ote on the item	(s) at prices noted above
				on the item	(15) at prices noted above
Print	ed Name/Signat	ure/Date			
12 17 17 1	ou rearrie, signat	arc/Date			
Tel. I	No. /Cellphone N	o./ e-mail address			