

Republic of the Philippines
Department of National Defense
OFFICE OF CIVIL DEFENSE
PEO Compound, Kumintang Ilaya, Batangas City

RFQ No. 2019-IVB-018 (2018)
REVISED REQUEST FOR QUOTATION No,
(Section 53.9 of RA 9184, Small Value Procurement)

Company Name: _____
Address: _____
PHILGEPS Registration No.: _____

The **Office of Civil Defense-MIMAROPA**, through its Regional Bids and Awards Committee will undertake an Alternative Method of Procurement through Negotiated Procurement in accordance with **Section 53.9 (Small Value Procurement) of the Revised Implementing Rules and Regulations of RA 9184.**

The OCD-MIMAROPA, hereinafter referred as "The Purchaser" now requests submission of price quotation for the hereunder project:

Name of Project	: Supply and Delivery of Forty (40) pieces of personal hygiene kit for OCD-MIMAROPA PDNA Composite Team
Brief Description	: Procurement of Forty (40) pieces of Personal Hygiene Kit for OCD MIMAROPA PDNA Composite Team.
Delivery Site	: Procurement Office, OCD MIMAROPA, PEO Compound, Kumintang Ilaya, Batangas City
Delivery Schedule	: Within fifteen (15) working days after receipt of the approved Purchase Order (PO)
Approved Budget for the Contract (ABC)	: Php32,000.00
Terms of Payment	: Send bill Policy Within fifteen (15) working days upon submission of required documents i.e. delivery receipt, sales invoice or charge invoice or billing statement and certificate of acceptance
Evaluation Criteria	: <u>Technical Responsiveness, Full compliance to the requirements and Lowest Price</u>
Fund Source	: CY 2018 Quick Response Fund (QRF)

Award of contract shall be made to the Bidder with the lowest quotation on **per item basis** for the subject goods which comply with the minimum requirements of technical specifications and other terms and conditions stated herein. **All Bids higher than the ABC shall automatically be disqualified.**

Prospective bidder shall accomplish and submit the duly signed "**Annex A (Technical Specifications) & Annex B (Schedule of Requirements); Annex C (Price Quotation Form (PQF))**", (under prescribed form), non submission of same in prescribed format shall automatically disqualified, not later than **10:00 a.m., 19 March 2019** at Procurement Office-OCD-MIMAROPA, PEO Compound Kumintang Ilaya, Batangas City. Submit your sealed quotation (indicate the project name) duly signed by your authorized representative. For clarifications, you may contact Ms. Almarose S Tabliago at telephone no/s (043) 723-4248 or email address at ocd4_mimaropa@yahoo.com. Use of forms other than OCD prescribed form shall not be acceptable.

Interested supplier/service provider is required to submit the following documents:

1. Valid and current Mayor's Permit/Business Permit
2. PHILGEPS Registration No.
3. Latest Income and Business Tax Return

The OCD-MIMAROPA reserves the right to accept or reject any or all bids / price quotations, to annul the process, and to reject all bids at any time prior to contract of award, without thereby incurring any liability to the affected bidder/s.


RICHARD T. CARANDANG
BAC Chairperson

ANNEX "A"

REVISED TECHNICAL SPECIFICATION (minimum requirements)
FOR PERSONAL HYGIENE KIT

Bidders must either state "Comply" or "Not Comply" or any other equivalent term in the column of "Statement of Compliance" against each of the individual parameters of each "Specifications"

Item No.	Item	Item Description	Statement of Compliance
	Deployment Bag	Supply and delivery of Personal Hygiene Kit for OCD MIMAROPA Post Disaster Needs Assessment (PDNA) Composite Team with the following technical specifications (minimum requirements)	
		- Hygiene Kit for two (2) weeks period of deployment supply, contents should be packed in a polybag with the following items: toothpaste, tooth brush, bath soap, shampoo, face towel, off lotion, comb and tissue (wipes)	
		- Send Bill Policy: Within fifteen (15) working days upon submission of required documents i.e. delivery receipt, sales invoice or charge invoice or billing statement and certificate of acceptance	

I hereby certify to comply and deliver all the above requirements.

Company Name : _____
 Address : _____

AUTHORIZED REPRESENTATIVE:

Signature : _____
 Complete Name : _____
 Date : _____

ANNEX "B"

REVISED PRICE QUOTATION

FOR PERSONAL HYGIENE KIT

Date: _____

The COMMITTEE ON CANVASS AND AWARDS
 OFFICE OF CIVIL DEFENSE-MIMAROPA
 PEO Compound, Kumintang Ilaya
 Batangas City

Sir/Madam:

1. After having carefully read and accepted the terms and conditions in the Request for Quotations (RFQ), hereunder are our financial proposal for the items identified below:

Item No.	Article and Description	Quantity/ Unit Measure	Shortest Delivery Period Offer	Unit Price	Total Price
1.	Supply and delivery of Personal Hygiene Kit for OCD MIMAROPA PDNA Composite Team	40 pcs			
	Note: Please specify offered specification, if any. Please note that it must be 100% compliant with the above specifications.				

Amount in Words : _____

Note: The above quoted prices are VAT inclusive.

2. We undertake, if our Quotation or Bid is accepted, to deliver the above goods within _____ calendar days from receipt of Purchase Order (PO)/Work Order (WO)/Contract
3. We agree to abide for the Quotation/Bid for a period of sixty (60) calendar days after the dated deadline for submission specified in your RFQ.
4. We understand that payment for items will be made to the winning supplier after the inspection and acceptance of good (s) delivered.
5. The above-quoted price is inclusive of all costs and applicable taxes.

Company Name : _____

Address : _____

Telephone & Mobile No.: _____

Email Address : _____

AUTHORIZED REPRESENTATIVE

Signature : _____

Date : _____