



Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 8889493
Procuring Entity PHILIPPINE RECLAMATION AUTHORITY
Title 942 boxes SURGICAL MASK, 3 PLY
Area of Delivery Metro Manila

Solicitation Number:	22-07-0656	Status	Active
Trade Agreement:	Implementing Rules and Regulations	Associated Components	1
Procurement Mode:	Shopping - Ordinary/Regular Office Supplies & Equipment (Sec. 52.1.b)	Bid Supplements	0
Classification:	Goods	Document Request List	11
Category:	Medical Supplies and Laboratory Instrument	Date Published	03/08/2022
Approved Budget for the Contract:	PHP 94,200.00	Last Updated / Time	03/08/2022 00:00 AM
Delivery Period:	7 Day/s	Closing Date / Time	08/08/2022 17:00 PM
Client Agency:			
Contact Person:	Angela Rodrigo BAC Secretariat Member PNOC Bldg. 3, PNOC Compound Energy Center, Rizal Drive Bonifacio Global City Taguig City Metro Manila Philippines 63-2-84595000 Ext.7202 bac@pea.gov.ph		

Description

-- SEE ATTACHED QUOTATION FORM FOR THE PARTICULARS --

REQUIRED SUPPORTING DOCUMENTS (attachment to your quotation):

1. Accomplished Quotation and Specifications Form
2. PhilGEPS Registration Number
3. Valid Business/ Mayor's Permit for 2022

Please use PDF (preferred) or IMAGE file extension for email submission.

Good day!

May we invite you to submit a quotation for the above-mentioned requirements of Philippine Reclamation Authority (PRA).

Please fill up the attached quotation form and submit the same with the required supporting documents. You can send it in hardcopy to PRA Temporary Office Located at:

Bldg. 3 PNO Compound
Energy Center, Rizal Drive
Bonifacio Global City
Fort Bonifacio, Taguig City

You may also email your proposal to bac@pea.gov.ph for the attention of BAC Secretariat. Online submission is preferred. Kindly check our website at <http://www.pea.gov.ph> for announcement of office hours during the community quarantine.

Quotation must be submitted on or before the quotation closing date as shown above. Quotation received with incomplete requirements and those received after the closing date will not be accepted.

You may write your queries and concerns to bac@pea.gov.ph.

Other Information

Email bac@pea.gov.ph for your online submission or queries related to this procurement. The advertisement is also posted at www.pea.gov.ph.

Created by Angela Rodrigo

Date Created 02/08/2022

The PhilGEPS team is not responsible for any typographical errors or misinformation presented in the system. PhilGEPS only displays information provided for by its clients, and any queries regarding the postings should be directed to the contact person/s of the concerned party.



Republic of the Philippines
OFFICE OF THE PRESIDENT
PHILIPPINE RECLAMATION AUTHORITY

7th floor, Legaspi Towers 200 Bldg., 107 Paseo De Roxas St., Legaspi Village, 1226 City of Makati
 Tel. No.: (02) 459-5000 • Facsimile No.: (02) 815-2662
 Website: www.pea.gov.ph • Email: info@pea.gov.ph

REQUEST FOR QUOTATION (Shopping or SVP ₱50,000 or less)

Date: _____

Project Name:	942 boxes SURGICAL MASK, 3 PLY	PhilGEPS Ref. No.:	8889493
		Approved Budget for the Contract (ABC):	₱ 94,200.00 ONLY
		Closing Date:	08 AUGUST 2022

INSTRUCTIONS:

<ol style="list-style-type: none"> 1. Do not alter the contents of this form in any way. 2. Bidder shall provide correct and accurate information required in this form. 3. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by the duly authorized representative. 4. If another form is used other than this RFQ, the quotation shall contain all the mandatory requirements/provisions including manifestation on the agreement with the Terms and Conditions of this RFQ. 5. Quote your lowest net government price(s), taxes included, F. O. B. destination, for the item(s)/service(s) listed hereunder, indicating the shortest time of delivery and furnishing this Office with descriptive brochures, catalogues (if available), and/or samples (if required). 6. Indicate the brand name of the offered item/s (if applicable). 7. The Technical Specifications must be complied with. Failure to do so shall render the quotation ineligible/disqualified. 8. For EXCLUSIVE MANUFACTURER, DISTRIBUTOR OR AGENT IN THE PHILIPPINES, attach appropriate documents to the said effect. 9. E-mail duly accomplished form to bac@pea.gov.ph or submit said form to PRA Office (BAC Secretariat). ONLINE SUBMISSION IS PREFERRED. 10. Quotations, including documentary requirements, received after the Closing Date/Deadline shall not be accepted. 11. Quotations exceeding the Approved Budget for the Contract (ABC) shall be rejected. 	<p><u>ATTACH THE FOLLOWING DOCUMENTS WITH YOUR QUOTATION</u></p> <p>✓ Valid PhilGEPS Registration Number</p> <p>✓ Mayor's/Business Permit for 2022</p> <p><i>(Per 2016 Revised IRR of R.A. 9184)</i></p>
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SUPPLIER INFORMATION (Fill-out completely):

Company Name:		PhilGEPS Reg. No.:	
		TIN:	
Address and Website		Email Address:	
		Contact Number:	

OFFICIAL QUOTATION FROM THE SUPPLIER:

NO.	QTY.	UNIT	DESCRIPTION	BRAND NAME (if applicable)	UNIT PRICE*	TOTAL PRICE (Unit Price x Qty)*
1.	942	box	SURGICAL MASK, 3 PLY			
			50 PCS/BOX			
			See Technical Specifications (pg.2)			
			Delivery within 7 calendar days Delivery address: <i>PEA Tollway Compound, Aguinaldo Blvd, Coastal Road Paranaque City</i>			
			==NOTHING FOLLOWS==			
GRAND TOTAL IN PHILIPPINE PESO:						

*Note: Amount shall be inclusive of taxes and delivery charges (if applicable).

Quoted by:

Signature Over Printed Name of Authorized Representative :		Position:	
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TERMS AND CONDITIONS (Fill-out completely the required information):

1. Payment shall be in the form of **Company Check** and price validity shall be **45 calendar days**.
2. Availability of item/s:
 - Delivery Within 7 calendar days (c.d.) upon
 - Pick-up receipt of Purchase Order (P.O.)
3. For Goods, the item/s shall be inspected on the scheduled date and time of the Procuring Unit.
4. Warranty period:
 - Not Applicable
 - Applicable warranty period shall be _____.
5. Indicate if quotation is:
 - VAT INCLUSIVE
 - NON-VAT (**ATTACH CERTIFICATION**)
6. Suppliers must download the attached document of a bid before the closing date to be included in the Document Request List (DRL). Suppliers must be registered in PhilGEPS.
7. Supplier must be ready to provide proof of compliance (pictures, brochure, certification, etc.) and sample when required by the BAC for evaluation purposes.
8. By submitting this quotation, supplier is authorizing PRA to deduct the following from the total amount as payment for taxes:

	GOODS				SERVICES			
	EXPANDED W/ TAX	TAX CERTIFICATE	FINAL VAT	TAX CERTIFICATE	EXPANDED W/ TAX	TAX CERTIFICATE	FINAL VAT	TAX CERTIFICATE
VARIABLE	1%	BIR Form 2307	5%	BIR Form 2307	2%	BIR Form 2307	5%	BIR Form 2307
NON-VAT	1%	BIR Form 2307	1%	BIR Form 2306	2%	BIR Form 2307	1%	BIR Form 2306

TECHNICAL SPECIFICATIONS

SPECIFICATIONS	COMPLY / NOT COMPLY	REMARKS
SURGICAL MASK, 3 PLY, 942 boxes <ul style="list-style-type: none"> - 50 pcs / box - FDA Registered Face Masks - Material: Non-woven Fabric 		
Please attach proof of FDA approval		
Delivery within 7 calendar days upon receipt of Purchase Order Delivery address: PEA Tollway Compound, Aguinaldo Blvd, Coastal Road Paranaque City		

Quoted by:

Signature Over Printed Name of Authorized Representative :		Position:	
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