



Republic of the Philippines
SOCIAL SECURITY SYSTEM
 Office of the Vice President
 Luzon North 1 Division
BIDS AND AWARD COMMITTEE

CANVASS FORM NO:

BACD LN1D-A-008

January 17, 2020

Date

SEALED CANVASS

Sir / Madam:

Please furnish us with your quotation on or before January 20, 2020 at 9AM for the following items. Submit the fully accomplished RFQ with the complete attachment indicated below (Notes 2 & 4) to the Administrative and General Accounting Section of the Office of the Vice President for Luzon North 1 Division or to the BACD Secretariat at 2/F SSS Baguio Bldg., Harrison Road, Baguio City.

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
1	1 lot	Messengerial Services for CY 2020 for OVP LN1D	Php _____	Php _____
	500 pcs.	Letter (Max 100 grams) Metro Manila (ABC: Php 170 per piece)		
	1,000 pcs.	Luzon (ABC: Php 130.00 per piece) One Pound (Max 500 grams)		
	125 pcs.	Metro Manila (ABC: Php 145.00 per piece)		
	200 pcs.	Luzon (ABC: Php 130.00 per piece) 5 Pounder (Min 2,500 grams)		
	48 pcs.	Metro Manila (ABC: Php 306.00 per piece)		
	102 pcs.	Luzon (ABC: Php 270.00 per piece)		
		Areas of Delivery must cover: Agoo, Baguio, Bangued, Bontoc, Candon, Cauayan, Ilagan, La Union, Laoag, Santiago, Solano, Tuguegarao, Vigan and Metro Manila.		
		Cost/pound divided by ABC Willing to be paid based on Government Terms/Policies Any Privileges to be provided to us. Allows Charge Account		
		Supplier must be willing to extend credit line up to Php 25,113.92 every month.		
		Price must be inclusive of EWT & VAT Approved Budget for the Contract: Php 301,367.00		

Delivery Terms: 15 Calendar days from receipt of approved Letter Order/Job Order/Purchase Order

Payment Terms: Supplier shall be paid in accordance to Government Terms. Shall be paid thru check.

Price validity: Three (3) Months

Very truly yours,

JAN NEILSON E. TUGAS
 BACD Secretariat

Canvassed by:

(Signature over Printed Name)

Position: _____ Date: _____

NOTE/S:

- The winning bidder for procurements/projects with Approved Budget for the Contract (ABC) of 100,000.00 and above is required to post a Performance Bond from receipt of Notice of Award equivalent to 5% (for Goods & Consulting Services) and 10% (for infrastructure Projects) Cash or cashier's/manager's check issued by a Universal or Commercial Bank; Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank. 30% if Surety bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security. **Performance Bond is MANDATORY in case of INFRASTRUCTURE Project.**
- The supplier is required to indicate its PhilGeps Registration Number on the Canvass Form especially if the ABC of the project is P50,000.00 and below. **Attach the PhilGeps Registration Certificate if the project is with ABC equal and/or greater to P50,000.01.**
- The SSS shall withhold the applicable taxes from the amount payable in accordance with the BIR regulations.
- The Mayor's Permit/Business Permit, PhilGeps Registration Number/Certificate, Income/Business Tax Return, Sec Registration/DTI/CDA, BIR 23 shall be submitted together with your quotation. The Omnibus Sworn Statement shall be submitted immediately upon request of the procuring branch dept. (for project with ABC of P50,000.00 up to P100,000.00) or upon request of the BAC-D after the evaluation (for project with ABC of P100,000.00 and above). If corporation, the Omnibus Sworn Statement shall be accompanied by a Board Resolution or Secretary's Certificate. **Non-submission of the foregoing documents shall be a ground for disqualification.**
- For clarification of details, please call Ms. Jessa Reen P. Bonilla or Ms. Divine Grace Parayno at (074) 447-0362/(074) 442-5661

Reminder : Price quotation should be made with extra care taking into account the specification and unit of quantity to avoid errors. The supplier binds himself/herself to this quotation's TERMS & CONDITIONS.

This is to certify that the data and quotation indicated on this form are valid/true & correct.

 Owner/Company Representative
 (Signature over Printed Name)

 (Date Received/Signed)

Name of Business: _____

Business Address: _____

Employer Number : _____ Contact Number : _____

PhilGEPS Registration No. _____ Email Address : _____

T.I.N. No.: _____