



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-K-048

November 10, 2020
 Date

OPEN CANVASS

Sir / Madam:

Please furnish us with your quotation on or before **November 13, 2020 at 9:00 AM** for the following items. Submit the fully accomplished RFQ with the complete attachment indicated below (Notes 2 & 4) to the Administrative Section of SSS Baguio Branch at 3/F SSS Baguio Building, Harrison Road, Baguio City, to the BACD Secretariat at 2/F SSS Baguio Bldg., Harrison Road, Baguio City.

For consideration with the difficulty in the access of courier services, you may also submit thru electronic mail by sending a scanned clear copy of documents mentioned above in PDF Format at tugasje@sss.gov.ph. Original copies shall follow as soon as practicable or as required by the procuring entity.

No.	Quantity	PARTICULARS	Unit Cost (per Lot/Quantity)	Total Cost
1	1 lot	Supply, Delivery and Installation of various 24 counter barriers for SSS Baguio Branch <i>Note: Contractor must verify the actual measurement of each furniture in which the counter barriers will be installed</i> Price must be inclusive of EWT & VAT Approved Budget for the Contract: Php 65,764.00	Php _____	Php _____

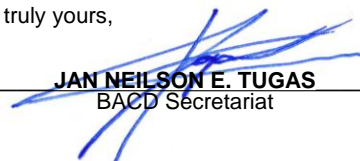
Delivery Terms: Within 20 Calendar Days from receipt of approved Letter Order/Job Order/Purchase Order

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

Price validity: Three (3) Months

Area of Delivery: SSS Baguio Branch

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 Current Mayor's Permit/Business Permit or receipt of payment; DTI, Sec Registration, CDA, whichever is applicable; Certificate of Registration with BIR (BIR Form 2303); PhilGeps Registration Number/Certificate 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 P100,000.01 and above). If corporation/partnership, the Omnibus Sworn Statement shall be accompanied by a Partnership Resolution/Board Resolution & Secretary's Certificate. **Non-submission of the foregoing documents shall be a ground for disqualification.**
- For clarification of details, please call Ms. Judalyn I. Bergonia or Ms. Florie-Anne C. Santos at (074) 444-2929

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: _____

SSS Employer Number : _____ Contact Number : _____

PhilGEPS Registration No. _____ Email Address : _____

T.I.N. No.: _____