

Date Received :_

Republic of the Philippines SOCIAL SECURITY SYSTEM Bacolod East Branch, Bacolod City

OPEN CANVASS



REQUEST FOR QUOTATION

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J. This is	for the period January to June 2020 Plate# SKC-121 Specification: 1	Job Order / Purchase Order, ernment Terms, ther with the latest Mayor's the submitted once a year and winning bidder is required to post a Notice of Award equivalent to 5% Cash, y Bond callable upon demand, orderect within the specified
This is accepted	Specification: 1 Diesel or approved equal for automotive 2 Euro 4 compliant 3 Clean Air Act of 2014 compliant for sulfur content 4 Water content (%vol.), 0.1 maximum 5 Biodegradable and Non-toxic ABC 61,230.00 Delivery Terms: 2 Calendar Days from receipt of approved Mode of Procurement: Small Value Procurement Payment Terms: Supplier shall be paid in accordance to Gove Price validity: Three (3) months GENERAL CONDITIONS: 1 Suppliers shall submot this Request for Quotation duly filled up toge Permit Phalgèps Registration No. BIR 2303, Sample Receipt (to be Omnibus Sworn Statement if ABC is greater than P50,000.00. 2 For canvass with an ABC of P 100,000.00 and above, the value of the contract stree.	Job Order / Purchase Order, ernment Terms, ther with the latest Mayor's se submitted once a year) and winning bidder is required to post a Notice of Award equivalent to 5% Cash, y Bond callable upon demand,
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This is I	schedule, inclusive of duly granted extensions, if any, shall be liable One-tenth (1/10) of one percent (1/15) of cost of the goods schedule.	ale for delivery for every gay of
This is I	delay uppl such goods are finally delivered.	10 00 00 00 00 00 00 00 00 00 00 00 00 0
This is !	 SSS reserves the right to reject any and all bids, declare a failure of 	if bridding, or not award the contract
This is I	(Section 41, 2016 RA 9164) Very Truly Yours	101)
This is t	very fruity rours.	LYNLEE-LU G. DATO
This is t		Acting Branch Head I
This is t		Tel. No. (034) 471-2224
This is t	email	address: kabankalan@sss.gov.ph
This is t accepte	to certify that my Company is updated in the payment of contributions and to	nans to SSS and after having carefully read of
accepte	ed your General Conditions, we bind ourselves to the price quoted on the st	pace provided above
	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	
	Owner/Company Representative	
	(Sign over Printed Name)	
	Carlotte Project Name	
ease indicate	te below your Business Name. Telephone Number and Date Received.	
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