



Republic of the Philippines
SOCIAL SECURITY SYSTEM

Visayas West 1 Division
Victorias Branch

G/F Redkey Bldg., Osmeña Avenue, Victorias City
Tel Nos. 399-2953/ 717-6234 Fax No. 399-2954

CANVASS FORM

OPEN CANVASS

Date: _____

Sir/Madam :

Please furnish us with your quotation on or before _____ subject for an agreement for the following items:

Item No.	Quantity	UNIT	PARTICULARS	Unit Cost	Total Cost
I	1500	Liters	Diesel Fuel for SSS Victorias Branch Service Vehicle SHG 302 for the period January to June 2020. Specification: 1. Diesel or approved equal for automotive 2. Euro 4 compliant 3. Clean Air Act of 2014 compliant to sulfur content 4. Water content (%vol.): 0.1 maximum 5. Biodegradable and Non-toxic ABC P76,650.00	P _____	P _____

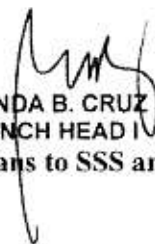
Reminder : Price quotation should be made with extra care taking into account the stated Specifications and Terms and Conditions , the offeror binds himself to this .

Terms and Conditions:

1. Fuel to be supplied must be Euro 4 compliant.
2. Fuel Station must be accessible to SSS Victorias Branch (within 10 Km radius).
3. The amount per liter of fuel to be charged to SSS shall be based on pump price at the time of purchase.
4. Delivery term shall be on a staggard basis within 6 months.
5. Only vehicle/s indicated in the Purchase Request Form will be gassed up.
6. Payment terms : Supplier shall be paid on billing every 15 days.
7. No cash bond shall be required.

NOTES: 1. For this canvass supplier is required to indicate his PhilGeps Registration Number on this canvass form.
2. The SSS shall withhold the applicable taxes from the amount payable in accordance with BIR regulations.

Very truly yours,


BRENDA B. CRUZ
BRANCH HEAD I

This is to certify that my Company is updated in the payment of contributions and loans to SSS and the data/quotation indicated are valid.

Signed Over Printed Name
Owner/Company Representative

Date

Business Name _____

Address : _____ Tel. No. _____

Your Business SSS No. _____

PhilGeps Registration No. _____

TIN Registration No. _____