

Republic of the Philippines SOCIAL SECURITY SYSTEM Antique Branch 2nd Floor Eagles Place Dalipe, San Jose, Antique

OPEN CANVASS

REQUEST FOR QUOTATION

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Sir / Madam:

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Date

Please furnish us with your quotation on or before

for the following items:

No.	Quantity	PARTICULARS	Unit Cost	Total Cost
	1 LOT	Supply and Installation of Counter Barrier for Antique Branch	P/Unit	P
		TECHNICAL SPECIFICATIONS 1 pc Glass panel, 6mm thick x 3' H x 6' 14 pcs Glass panel, 6mm thick x 3' H x 5' 23 pcs Glass panel, 6mm thick x 3' H x 4' 30 pcs Bronze Aluminum Channel, 8' long x 1/4" x 1/2" 15 Tube Silicon Sealant (brown) 288 pcs Wood screw, 1/8" x 1" 21 sets installation		
	ABC	76,039.95		

Delivery Terms: 30 Calendar Days from receipt of approved Job Order / Purchase Order. Mode of Procurement

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

Price validity : Three (3) months

GENERAL CONDITIONS:

- 1.) Suppliers shall submit this Request for Quotation duly filled up together with the latest
 - Mayor's Permit, Philgeps Registration No., BIR 2303, Sample Receipt (to be submitted once a year) and Omnibus Sworn Statement if ABC is greater than P 50,000.00
- 2.) For canvass with an ABC of P 100,000.00 and above, the winning bidder is required to post a
- Performance Bond within Three (3) Calendar Days from receipt of Notice of Award equivalent to 5% Cash, Cashier's / Manager's Check, Bank Guarantee / Draft or 30% Surety Bond callable upon demand of the contract price.
- 3.) Winning bidder who fails to satisfactorily deliver goods under the contract within the specified schedule, inclusive of duly granted extensions, if any, shall be liable for damages equal to One-tenth (1/10) of one percent (1%) of cost of the goods schedule for delivery for every day of delay until such goods are finally delivered.
- 4.) SSS reserves the right to reject any and all bids, declare a failure of bidding, or not award the contract. (Section 41, 2016 RA 9184)

Very Truly Yours,

JCERO BRANCH HEAD (036) 5408112 E-mail Address: antique@sss.gov.ph

This is to certify that my Company is updated in the payment of contributions and loans to SSS and after having carefully read and accepted your General Conditions, we bind ourselves to the price quoted on the space provided above.

Owner/Company Representative (Sign over Printed Name)

Please indicate below your Business Name,	
Address and Telephone Number and Date Received.	
Business Name:	

Business Address :	1	
E-mail Address :	Tel. No	
PhilGeps Registration No.	TIN No	
Your Business SSS Number:		
Date Received :		