



Republic of the Philippines
Mariveles Water District
 Mariveles, Bataan

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 Tel. No. (047) 935-4635; Telefax: (047) 935-5561; Hotline: (0921) 2876851

REQUEST FOR QUOTATION
 For Above Php 50,000.00 to Php 500,000.00

Date: April 30, 2021

Procurement Title: Supply & Delivery of COVID 19 Response Items

Approved Budget for the Contract (ABC): Php 140,000.00

Name of Company : _____

Address : _____

Please quote your lowest price on the item listed below, subject to the general conditions stating the shortest time delivery and submit your quotation duly signed by your representative not later than May 10, 2020. Time 10:00 AM.

GENERAL CONDITIONS:

| | |
|---|--|
| 1 | ALL ENTRIES MUST BE TYPEWRITTEN EXCEPT SIGNATURE |
| 2 | BUSINESS PERMIT/MAYOR'S PERMIT, TAX CLEARANCE/ANNUAL INCOME TAX RETURN, PROOF OF PHILGEPs REGISTRATION AND DTI/SEC SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION. |
| 3 | BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED. IF APPLICABLE. |
| 4 | QUOTATION MUST BE DENOMINATED IN PHILIPPINE PESO, INCLUSIVE OF ALL TAXES AND LEVIES. QUOTATIONS EXCEEDING THE APPROVED BUDGET FOR THE CONTRACT (ABC) SHALL AUTOMATICALLY BE REJECTED |
| 5 | SUBMISSION WILL BE TREATED AS "OPEN QUOTATION" AND MAY ALTERNATIVELY BE TRANSMITTED THRU FAX OR E-MAIL. |
| 6 | MARIWAD RESERVES THE RIGHT TO POST QUALIFY ANY SUPPLIER AND/OR REJECT ANY/OR ALL SUBMITTED QUOTATIONS. |
| 7 | AWARD OF CONTRACT SHALL BE MADE ON THE LOWEST QUOTATION (FOR GOODS & INFRA) OR HIGHEST RATED OFFER (FOR CONSULTING SERVICES) WHICH COMPLIES WITH THE MINIMUM SPECIFICATIONS AND OTHER TERMS AND CONDITIONS STATED HEREIN. |
| 8 | LIQUIDATED DAMAGES (L.D.) EQUIVALENT TO ONE TENTH OF ONE PERCENT OF THE VALUE OF UNDELIVERED AND/OR RENDERED PORTIONS OF THE CONTRACT/P.O. OUTSIDE THE PRESCRIBED DELIVERY PERIOD SHALL BE IMPOSED FOR EVERYDAY OF DELAY. OWNER SHALL RESCIND THE CONTRACT/P.O. IF THE CUMMULATIVE AMOUNT OF L.D. EXCEEDS 10% THE VALUE OF THE CONTRACT/P.O. w/o PREJUDICE TO OTHER COURSES OF ACTION AND REMEDIES OPEN TO IT, SUCH AS BUT NOT LIMITED TO UNIFORM GUIDELINES FOR SUSPENSION & BLACKLISTING OF SUPPLIERS/CONTRACTORS/CONSULTANTS. |
| 9 | SUBMISSION OF SWORN STATEMENT ATTESTING OF NO RELATIONSHIP TO ANY BAC MEMBER |

| Item No. | ITEM AND DESCRIPTION | QTY | UNIT | UNIT COST |
|----------|--|-----|-------|-----------|
| | Supply and Delivery of COVID 19 Response Items | | | |
| 1 | Alcohol, Ethyl/Isopropyl, 70% Solutions, 1L (indicate brand offered: _____) | 100 | btls | |
| 2 | Face Mask, 3 ply (50 pcs/box), FDA approved (indicate brand offered: _____) | 100 | boxes | |
| 3 | Disinfectant Spray, 510G, Kills 99.9 % bacteria and Viruses (indicate brand offered: _____) | 50 | cans | |
| 4 | Hand Sanitizer, 500 mL, Kills 99.9 % bacteria and Viruses (indicate brand offered: _____) | 50 | btls | |
| 5 | Anti-bacterial Liquid Hand Soap, 500 mL, Kills 99.9 % bacteria and Viruses (indicate brand offered: _____) | 50 | btls | |
| 6 | Face Shield, waterproof & Anti-fog, protective isolation eyeglasses w/ clear PET film, FDA approved (indicate brand offered: _____) | 200 | Pcs | |
| 7 | Digital Thermal Scanner/Gun (indicate brand offered: _____) | 3 | pcs | |

| | | | | |
|--|--|--|-------|--|
| | | | | |
| | | | TOTAL | |

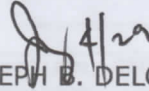
NOTE: PLEASE INDICATE BRAND AND MODEL OF THE ITEM/S.

Delivery Period(Calendar days): _____
 WARRANTY: _____
 PRICE VALIDITY: _____

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

 SIGNATURE OVER PRINTED NAME
 Date : _____
 Contact # : _____
 E-mail Add: _____

For further information, please contact the BAC at our office located at P. Road, San Isidro, Mariveles, Bataan.


 ENG'R JOSEPH B. DELOS REYES
 BAC Chairman

Noted by;


CRISTINELA RUTH I. LAMAYRA
 General Manager

Date of PhilGEPS posting: April 30, 2021

1. PENALTY FOR DELAY SHALL BE EQUIVALENT TO ONE TENTH OF ONE PERCENT OF THE VALUE OF UNDELIVERED PORTIONS OF THE CONTRACT/P.O. OUTSIDE THE PRESCRIBED DELIVERY PERIOD SHALL BE PENALTY FOR DELAY. OWNER SHALL RESCIND THE CONTRACT/P.O. IF THE CUMULATIVE AMOUNT OF DELAY PENALTY REACHES 10% THE VALUE OF THE CONTRACT/P.O. IN ADDITION TO OTHER COURSES OF ACTION AND REMEDY THERE TO IT, SUCH AS BUT NOT LIMITED TO UNIFORM SUSPENSION & BLACKLISTING OF SUPPLIERS/ CONTRACTORS/CONSULTANTS.

| ITEM NO. | ITEM AND DESCRIPTION | QTY | UNIT | UNIT COST |
|----------|--|-----|------|-----------|
| 1 | Hand and Infection of COVID-19 Resistant Items | | | |
| 1 | Hand Sanitizer, 20% Alcohol, 500ml, 1L | 500 | EA | |
| 2 | Hand Sanitizer, 10% Alcohol, 500ml, 1L | 100 | EA | |
| 3 | Hand Sanitizer, 70% Alcohol, 500ml, 1L | 50 | EA | |
| 4 | Hand Sanitizer, 70% Alcohol, 500ml, 1L | 50 | EA | |
| 5 | Hand Sanitizer, 70% Alcohol, 500ml, 1L | 50 | EA | |
| 6 | Hand Sanitizer, 70% Alcohol, 500ml, 1L | 200 | EA | |
| 7 | Hand Sanitizer, 70% Alcohol, 500ml, 1L | 3 | EA | |