

**Republic of the Philippines
SENATE
REQUEST FOR QUOTATION**



Date : 8/21/2024 2:41:09PM
 RSQ No. : RSQ-24-08-042
 Requisitioner : RMMS
 Canvasser : MARK CRISTOPHER B. ZULUETA

Sir/Madam:
 We invite all GEPS registered bidders to submit sealed quotation for the item/s listed below, addressed to the Chairman, Bids and Awards Committee (BAC), 4/F Senate of the Philippines, GSIS Bldg., Financial Center, Pasay City. The quotation for Purchase Request No. **PR-24-08-620** must be submitted to the Office of the Chairman, Bids and Awards Committee, Room 408 or the Secretariat, Bids and Awards Committee, Room 401, 4/F Senate of the Philippines, GSIS Building, Financial Center, Pasay City, not later than 5P.M. of _____. Kindly observe and comply with the stated specifications / descriptions / unit of items for quotation, and specify country of manufacture or origin in the item, any erasure must be properly initialed by the bidder. Bidders are presumed to have reviewed all bids indicated herein before submission to the BAC. Please do not forget to indicate the following references in your envelope "PR NO. _____ / RSQ NO. _____, Assigned Canvasser: _____, **CLOSING DATE:** _____"

LIKewise, ALL QUOTATIONS MUST BE VALID FOR AT LEAST THIRTY (30) TO FORTY FIVE (45) DAYS FROM THE CLOSING DATE OF POSTING WITH THE PhilGEPS AND SUBJECT TO THE GENERAL CONDITIONS FOUND AT THE BACK OF THIS FORM.

[Signature]
ATTY. MARIA VALENTINA S. CRUZ
 CHAIRPERSON
 BIDS AND AWARDS COMMITTEE

THE CHAIRMAN
 Bids and Awards Committee
 c/o Secretariat, Bids and Awards Committee
 Room 401 4/L, Senate of the Philippines, GSIS Building, Financial Center, Pasay City
 Fax No. 552-6601 local 1602 or 552-6793

Sir:
 As requested in your letter above, we are pleased to quote hereunder our price/s for the following item/s subject to the General Conditions stated at the back:

ITEM NO.	QTY	UNIT	ITEM/S DESCRIPTION (Kindly indicate BRAND NAME & MODEL of item/s of your offer/bid)	APPROVED BUDGET	UNIT PRICE (Inclusive of all Taxes)	TOTAL
			<i>PR-24-08-620 (RMMS)</i>			
1	2	UNIT	UNINTERRUPTIBLE POWER SUPPLY (UPS) <i>Specifications:</i> * US/Japan/Korea/European brand * At least 650VA capacity * 230V Output and input voltage * Automatic Voltage Regulator * At least two (2) Output Sockets * IEC 62040 standard conformance * One (1) year warranty	Php 13,500.00 <i>Php6,750.00/UNIT</i>		

(QUOTATIONS must be valid for at least thirty [30] to forty five [45] days from closing date)

TERMS OF DELIVERY _____

TERM/S OF PAYMENT: Government Terms (NO C.O.D. / NO ADVANCE PAYMENT) _____
 (Name of Company)

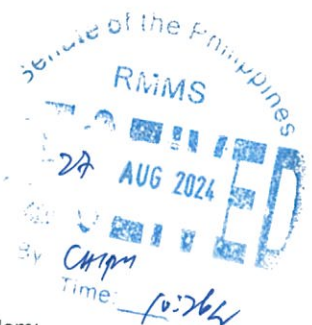
Address of Supplier _____

E-Mail Address _____ **PhilGEPS Reg. No.** _____ **Expiry Date:** _____

Tel./Fax No./s _____

TIN _____ **(Signature over Printed Name Authorized Representative)** _____

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----- Nothing Follows -----

Remarks:
 In accordance with Annex "H" Appendix A of the revised IRR of RA 9184, all quotations must be submitted on or before the deadline with the PhilGEPS Registration number and Mayor's/ Business Permit. Additional documentary requirements must also be submitted together with the quotation for Small Value Procurement (SVP), as follows:
 Professional license/Curriculum Vitae for Consulting Services;
 PCAB License for Infrastructure;
 Income/Business Tax Return for ABC above Php 500,000.00;
 For methods of procurement requiring Mayor's Permit and PhilGEPS Registration Number, Certificate of Platinum Membership may be submitted in lieu of said documents.
 For individuals engaged under Small Value Procurement, only the BIR certificate of Registration shall be submitted in lieu of DTI registration and Mayor's Permit.
 Winning bidders under Small Value Procurement with an ABC above Php50,000.00 will also be required to submit a Notarized Omnibus Sworn Statement prior to the preparation of the Contract/Purchase or Job Order.
 Failure of the bidder to submit the required documents is a ground for disqualification.

(QUOTATIONS must be valid for at least thirty [30] to forty five [45] days from closing date)

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TERM/S OF PAYMENT: Government Terms (NO C.O.D. / NO ADVANCE PAYMENT) _____
 Address of Supplier _____ (Name of Company)
 E-Mail Address _____ PhilGEPS Reg. No. _____ Expiry Date: _____
 Tel./Fax No./s _____
 TIN _____ (Signature over Printed Name Authorized Representative)