



UNIVERSITY OF THE PHILIPPINES

LOS BANOS

Los Banos, IV-A

VAT Reg. TIN: 000-864-006-00004

UPLB BAC SECRETARIAT

BY: DATE: 5/24/21

MAY 31 2021 ^{TU} _{10PM}

UPLB-RQ- 5-078-21-GOODS

DEADLINE OF SUBMISSION

Request for Quotation/ Bid Form (Technical Specifications)

END-USER

PR #: **94151**

DEADLINE OF
SUBMISSION:

Suppliers Name: _____

Date

September 11, 2020

Fund Code:

91-510-14

MOP:

Contact No:

536-2725 (Loc. 114)

Contact Person

Joel Gallardo

Please quote your lowest price on the item/s listed below, subject to the General Conditions below.

Note:

1. Bidders shall provide correct and accurate information required in this form. All entries must be typewritten or in print and properly accomplished. Do not leave blank entries, put N/A for not applicable.
2. Price quotation/s to be denominated in Philippine Peso shall include all taxes, duties, and/ or levies payable.
3. Bidders must indicate the BRAND and MODEL NUMBER for equipment and its accessories or peripherals. Evidence shall be in the form of manufacturer's un-amended sale literature, unconditional statement of specification and compliance issued by the manufacturer and sample.
4. Quotation through fax/email is acceptable. Winning bidder shall submit original signed RQ before issuance of Purchase order (P.O.).
5. Quotations exceeding the Approved Budget for Contract shall be rejected.
6. Documentary requirements per Memorandum No. 03 Series of 2017 shall be attached upon submission of the quotation
7. Others: _____

ITEM No.	GENERAL NAME OF THE ITEM	REQUIRED SPECIFICATIONS	UNIT OF MEASURE	QTY	ESTIMATED UNIT APPROVED BUDGET OF THE CONTRACT	ESTIMATED TOTAL APPROVED BUDGET OF THE CONTRACT	OFFERED SPECIFICATION <small>Suppliers must state here the detailed technical specifications of their offer against each of the individual parameters of each requirements</small>	QUOTED UNIT PRICE	TOTAL QUOTED PRICE	EVALUATION <small>(Leave this space blank. For BAC/Evaluators only)</small>
1	Prepaid Cellular Network Cards	Cellular Cards, 500 denomination, Globe network (RHP-20) (NGD-6) (MTP-6)	pc	32	500.00	16,000.00				
2	Prepaid Cellular Network Cards	Cellular Cards, surf, call & text, 100 denomination, assorted networks (MAM-10) (FZT-20)	pc	30	100.00	3,000.00				
3	Prepaid Cellular Network Cards	Cellular Cards, surf, call & text, 300 denomination, assorted networks (MAM-10) (FZT-16) (JDS-15)	pc	41	300.00	12,300.00				
4	Prepaid Cellular Network Cards	Cellular Cards, surf, call & text, 500 denominations, assorted networks (MAM-4) (JDS-9)	pc	13	500.00	6,500.00				
5	Prepaid Cellular Network Cards	Cellular Prepaid Card, 500 pesos Call and Text card denominations, SMART (MTP-10)	pc	10	500.00	5,000.00				
6	Prepaid Cellular Network Cards	Cellular Prepaid Cards, 500 Denominations/Face Value with at least 1 Year Expiration upon delivery Talk and Text network (SMM-15)	pc	15	500.00	7,500.00				
7	Prepaid Cellular Network Cards	Cellular prepaid load cards, (Globe), 100 load (NGD-10)	pc	10	100.00	1,000.00				
8	Prepaid Cellular Network Cards	Cellular prepaid load cards, (Globe), 300 load (NGD-20) (HADT-6) (SMM-15)	pc	41	300.00	12,300.00				
9	Prepaid Cellular Network Cards	Prepaid card 300 (Smart) (SMM-7)	pc	7	300.00	2,100.00				
10	Prepaid Cellular Network Cards	Prepaid card 300 (TM) (SMM-7)	pc	7	300.00	2,100.00				
11	Prepaid Cellular Network Cards	Smart Pre-paid Card, 300 Php denomination (HADT-6)	pc	6	300.00	1,800.00				

12	Prepaid Cellular Network Cards	Sun Pre-paid Card, 300 Php denomination (HADT-6)	pc	6	300.00	1,800.00				
13	Prepaid Cellular Network Cards	TM Pre-paid Card, 300 Php denomination (HADT-6)	pc	6	300.00	1,800.00				
TOTAL ABC :						73,200.00				
							TOTAL QUOTED AMOUNT IN WORDS:			

Reviewed and Checked By:

BAC TWG

Please quote at your government price (including VAT) and state that the time within which you can make delivery. It will be appreciated if we can have your quotation in the office as soon as possible on or before the deadline stated herein.

Susana M. Mercado
SUSANA M. MERCADO, Ph.D.

BUYER/ END-USER

TERMS AND CONDITIONS:

- Price quotation/s shall be valid for a period of at least (30) calendar days from the date of submission.
- In order to assure that manufacturing defects shall be corrected by supplier, a warranty security shall be required from the contract awardee for a minimum period of **three (3) months**, in the case of EXPENDABLE SUPPLIES, or a **minimum of one (1) year warranty and two (2) to three (3) years extended warranty (if applicable)** in the case of NON-EXPENDABLE SUPPLIES after acceptance by End-user of the delivered supplies.
- Delivery period within _____ calendar days.
- Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and conditions stated herein.
- UPLB reserves the right to reject any or all offers as may be considered most advantageous to the University.
- Any interlineations, erasure, or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.

Requirements for Suppliers (GPPB Resolution No. 21-2017)

REQUIREMENTS	Shopping (Section 52)	Negotiated Procurement- Small Value Procurement (Section 53.9)	Negotiated Procurement- Lease of Real Property or Venue (Section 53.10)	Negotiated Procurement- Scientific, Scholarly or Artistic Work, Exclusive Technology and Media Services (Section 53.6)	Negotiated Procurement- Emergency (Section 53.2)
1 Mayor's/Business Permit	/	/	/	/	/
2 PhilGEPS Registration Number	/	/	/	/	/
3 Professional license/ CV (consulting services)		/		/	
4 PCAB License (for Infrastructure)		/			
5 Income / business tax returns (except for government agencies as lessor)		FOR ABC'S ABOVE 500K	/	/	FOR ABC'S ABOVE 50K
6 Omnibus Sworn Statement		FOR ABC'S ABOVE 50K			FOR ABC'S ABOVE 500K
7 NFCC for Infrastructure with ABC above Ph500k		/			FOR ABC'S ABOVE 50K

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

Name of the Company:

Address: _____

Tel. No. : _____

Fax No. : _____

Signature over Printed

Name of Representative: _____

Email Address: _____

Position: _____

Date: _____