



REPUBLIC OF THE PHILIPPINES  
**DEPARTMENT OF BUDGET AND MANAGEMENT**  
GENERAL SOLANO STREET, SAN MIGUEL, MANILA

## **REQUEST FOR QUOTATION**

The Department of Budget and Management (DBM), through its Administrative Service (AS), will undertake a Small Value Procurement for the "Annual Pest and Termite Management," in accordance with Section 53.9 of the Implementing Rules and Regulations of Republic Act No. 9184 and DBM Circular Letter no. 2018-8<sup>1</sup>.

Name of Project : Annual Pest and Termite Management  
Approved Budget : Three Hundred Seventy-Five Thousand Pesos (Php375, 000.00)  
for the Contract (ABC)  
Specifications : See attached Annex "C" for the Technical Specifications  
Location : G/F DBM Building III, Gen. Solano St., San Miguel, Manila  
Delivery Date : April 26, 2019 – December 31, 2019

Interested suppliers are required to submit their valid and current Mayor's Permit, Income/Business Tax Return (for ABCs above Php500k), PhilGEPS Registration Number, Omnibus Sworn Statement and Authority of Signatory, upon submission of quotation. PhilGEPS Platinum Membership may be submitted in lieu of the Mayor's/ Business Permit and the PhilGEPS Registration Number.

Award of contract shall be made to the lowest quotation, which complies with the minimum description as stated above and other terms and conditions stated in the price quotation form.

**In addition, award of the contract may be issued until the FY 2019 General Appropriations Act has been enacted.**

Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by the bidder or his/her duly authorized representative/s.

Submission of quotation and eligibility documents is on or before 3:00 p.m. of **January 28, 2019** at the Administrative Service, Ground Floor, DBM Bldg. III, Gen. Solano St., San Miguel, Manila. Open submission may be submitted, manually or through facsimile at fax no. 735-1957.

For inquiries, you may contact us at tel. nos. 735-4902 or 657-3300 local 3115.

Very truly yours,

  
**THEA MARIE CORINNE F. PALARCA**  
Director IV, Administrative Service

<sup>1</sup> Guidelines on the Conduct of Early Procurement for the Fiscal Year (FY) 2019 National Expenditure Program (NEP).



**PRICE QUOTATION FORM**

Date: \_\_\_\_\_

The Administrative Service  
 Department of Budget and Management  
 Ground Floor, DBM Bldg. III, Gen. Solano St.,  
 San Miguel, Manila

Sir/Madam:

After having carefully read and accepted the terms and conditions in the Request for Quotation, hereunder is our quotation/s for the item/s as follows:

Description	Specification	Quantity	Unit Price	Total Price
<b>Annual Pest and Termite Management</b>	<b>1. Pest Management</b>	1 lot		
	a. April 26- 30, 2019			
	b. May 1 – 31, 2019			
	c. June 1 – June 30, 2019			
	d. July 1 – July 31, 2019			
	e. August 1 – 31, 2019			
	f. September 1- 30, 2019			
	g. October 1- 31, 2019			
	h. November 1- 30, 2019			
	i. December 1- 31, 2019			
	<b>2. Termite Management</b>			
	a. April 26- 30, 2019			
	b. May 1 – 31, 2019			
	c. June 1 – June 30, 2019			
	d. July 1 – July 31, 2019			
	e. August 1 – 31, 2019			
	f. September 1- 30, 2019			
	g. October 1- 31, 2019			
	h. November 1- 30, 2019			
	i. December 1- 31, 2019			
	Total (inclusive of VAT)			

(Amount \_\_\_\_\_ in \_\_\_\_\_ Words)

\_\_\_\_\_

\_\_\_\_\_

The above-quoted prices are inclusive of all costs and applicable taxes.



Very truly yours,

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Name/Signature of Representative

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Name of Company

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Contact No.

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	<b>USED</b>	
	3.1 For every scheduled treatment, the Supplier shall present the chemicals/solutions to be used, for prior inspection and approval of the AS-GSD	As necessary
<b>4</b>	<b>SUBMISSION OF ACCOMPLISHMENT REPORT</b>	
	4.1 The Supplier shall submit standard monthly accomplishment report together with pest and termite management checklist, forwarded to the AS-GSD	Monthly
<b>5</b>	<b>SUBMISSION OF WORK SCHEDULE</b>	
	5.1 The Supplier must submit a definite work schedule for the duration of the contract in the prescribed format of the AS-GSD	Within seven (7) days upon receipt of Notice To Proceed (NTP)

I hereby certify to comply and deliver all the above requirements.

\_\_\_\_\_

Name of Company/Bidder                      Signature over Printed Name of Representative                      Date

## ***Technical Specifications***

<b>1</b>	<b>PEST MANAGEMENT</b>
	<p>1.1 Pest management treatment of cockroach, mosquitoes, flies and other crawling and flying insect; rat and mice control</p> <p>1.2 Residual Insecticidal Spraying (Thermal Fogging/Misting) weekly spray all floor drains at kitchen area, bathrooms, store rooms, conference rooms, ornamental plants and other areas where drain pose a potential harborage. Must be odorless and non-staining</p> <p>1.3 Application of insecticide in places and areas where insect/pest congregate, crawl and hide including cracks and crevices where they enter as well as undersides of furniture and appliances</p> <p>1.4 Application of insecticidal bait/gel near harborage and aggregation areas, such as corners of movement, electrical wirings, telephone apparatus, etc. using advanced and delivery system gel abatement</p> <p>1.5 General survey and thorough inspection of the entire premises to determine the location of other unforeseen breeding sites of flying insects</p> <p>1.6 Spraying/misting of larvicides areas where mosquitoes including adult flies and other small flying insects take refuge, and immediate cleaning of office furniture and equipment that were affected by the</p>

chemical/solutions used in spraying/misting

1.7 Inspection of the entire area most particularly the kitchen area, storerooms, ceilings and other potential harborage to determine the species of pest, their feeding habits and harborage. To check signs of infestation, including dropping, damages, urine pillars, runs, footprints, smear and nests

1.8 Regular inspection of all bait trays and bait stations installed at regular intervals as indicated on the rodent's location map. This is aimed to determine the "bait total intake" and to replenish baits to have sufficient food available for rodents

1.9 Set up rodenticidal bait preparation inside the building and susceptible harborage for rats/mice. Use anticoagulant poison to avoid bait-shyness and outsmart the sharp instinct of rats and mice through its slow kill  
Effect

1.10 Install mechanical rat/mouse trap and glue boards where poison baits are inadmissible and where appropriate around the perimeter area of the building

1.11 Conduct study without additional cost, on how to totally eradicate pests in the premises of the DBM, for implementation once approved by the AS Director

## **2 TERMITE MANAGEMENT**

2.1 Thorough inspection of the area to pinpoint termite colonies, if any

2.2 Supply, delivery, installation of indoor and outdoor baiting system/stations,

	<p>which shall be interior wall mounted or underground, as determined by the DBM Building and Grounds Supervisor</p> <p>2.3 Conduct of monthly inspection/maintenance services, including immediate Replacement of baiting chemical/solution, whenever necessary</p> <p>2.4 The baiting chemical/compound/substance/material shall be at least five (5) years in the Philippine market and be installed in accordance with the manufacturer's recommendations</p> <p>2.5 The baiting system must be available to eliminate/control all types of termite common in the Philippines</p> <p>2.6 Conduct study without additional cost, on how to totally eradicate termites in the premises of the DBM, for implementation once approved by the AS Director</p>
<b>3</b>	<b>SAFETY MEASURES IN THE USE OF PESTICIDE CHEMICALS/SOLUTIONS</b>
	<p>3.1 Chemicals/solutions to be used by the supplier must be approved by the Food and Drug Administration (FDA)</p> <p>3.2 The supplier shall ensure that all chemicals/solutions to be used shall not pose as a health hazard to the occupants of the building</p> <p>3.3 The supplier shall follow all safety precautions in the application and handling of all pesticide and termiticide chemicals/solutions</p> <p>3.4 The supplier shall ensure that all office areas, including flooring, wall, office furniture and fixtures, etc. will have no stain marks or droplets of chemical/solution used</p>
<b>4</b>	<b>INSPECTION OF CHEMICALS/SOLUTIONS USED</b>
	<p>4.1 In every treatment schedule, the supplier shall notify the AS-GSD and submit the chemicals/solutions to be used for inspection, for approval prior to conduct</p>



	of the activity
<b>5</b>	<b>SUBMISSION OF REPORTS</b>
	<p>5.1 The supplier must submit a monthly accomplishment report/s or checklist to the AS-GSD indicating therein the areas that were treated and monitored</p> <p>5.2 Said report must be confirmed/acknowledged by the DBM representative present during the treatment</p>

<b>LOCATION</b>	<b>PERIMETER</b>	<b>DISTRIBUTION OF BAITING SYSTEM/STATIONS</b>
Building I	1,256.85 sq.m.with 113 LM perimeter	12 units
Building II	2,880 sq.m.with 230 LM perimeter	24 units
Building III	2,692 sq.m. with 154.64 LM perimeter	12 units
Multi-Purpose Building	656.4 sq.m. with 102.7 LM perimeter	8 units

I hereby certify to comply and deliver all the above requirements.

\_\_\_\_\_

Name of Company/Bidder                      Signature over Printed Name of Representative                      Date

## Omnibus Sworn Statement

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REPUBLIC OF THE PHILIPPINES )  
CITY/MUNICIPALITY OF \_\_\_\_\_ ) S.S.

### AFFIDAVIT

I, *[Name of Affiant]*, of legal age, *[Civil Status]*, *[Nationality]*, and residing at *[Address of Affiant]*, after having been duly sworn in accordance with law, do hereby depose and state that:

1. **Select one, delete the other:**

*If a sole proprietorship:* I am the sole proprietor of *[Name of Bidder]* with office address at *[address of Bidder]*;

*If a partnership, corporation, cooperative, or joint venture:* I am the duly authorized and designated representative of *[Name of Bidder]* with office address at *[address of Bidder]*;

2. **Select one, delete the other:**

*If a sole proprietorship:* As the owner and sole proprietor of *[Name of Bidder]*, I have full power and authority to do, execute and perform any and all acts necessary to represent it in the bidding for *[Name of the Project]* of the *[Name of the Procuring Entity]*;

*If a partnership, corporation, cooperative, or joint venture:* I am granted full power and authority to do, execute and perform any and all acts necessary and/or to represent the *[Name of Bidder]* in the bidding as shown in the attached *[state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate issued by the corporation or the members of the joint venture)]*;

3. *[Name of Bidder]* is not “blacklisted” or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;
4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
5. *[Name of Bidder]* is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

6. **Select one, delete the rest:**

*If a sole proprietorship:* I am not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a partnership or cooperative:* None of the officers and members of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a corporation or joint venture:* None of the officers, directors, and controlling stockholders of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. *[Name of Bidder]* complies with existing labor laws and standards; and
8. *[Name of Bidder]* is aware of and has undertaken the following responsibilities as a Bidder:
  - a) Carefully examine all of the Bidding Documents;
  - b) Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
  - c) Made an estimate of the facilities available and needed for the contract to be bid, if any; and
  - d) Inquire or secure Supplemental/Bid Bulletin(s) issued for the *[Name of the Project]*.
9. *[Name of Bidder]* did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_ day of \_\_\_, 20\_\_ at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
Bidder's Representative/Authorized Signatory

**SUBSCRIBED AND SWORN** to before me this \_\_\_ day of *[month]* *[year]* at *[place of execution]*, Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No.02-8-13-SC). Affiant/s exhibited to me his/her *[insert type of government identification]*

*card used*], with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_ and his/her \_\_\_\_\_ No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_.

Witness my hand and seal this \_\_\_ day of *[month]* *[year]*.

**NAME OF NOTARY PUBLIC**

Serial No. of Commission \_\_\_\_\_

Notary Public for \_\_\_\_\_ until \_\_\_\_\_

Roll of Attorneys No. \_\_\_\_\_

PTR No. \_\_, *[date issued]*, *[place issued]*

IBP No. \_\_, *[date issued]*, *[place issued]*

Doc. No. \_\_\_\_\_

Page No. \_\_\_\_\_

Book No. \_\_\_\_\_

Series of \_\_\_\_\_