

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 "Pest Control Services" in accordance with Section 53.9 of the Implementing Rules and Regulations of Republic Act No. 9184.

Name of Project

: Pest Control Services

Approved Budget for the Contract

Three Hundred Thousand Pesos Only (Php300, 000.00)

Specifications

See attached Annex "B" for the Technical Specifications

Location

: G/F DBM Building III, Gen. Solano St., San Miguel, Manila

Delivery Date

: See attached Annex "C" for the Schedule of Requirements

Interested suppliers are required to submit their valid and current Mayor's Permit, Income/Business Tax Return, PhilGEPS Registration Number, Notarized Omnibus Sworn Statement, Schedule of Requirements (Annex "C"), Statement of Compliance (Annex "B") and price quotation form (Annex "A") upon submission of quotation.

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

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 **April 11, 2018** 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

Director IV, Administrative Service

PRICE QUOTATION FORM

Date				
The Administrative Some Department of Budge Ground Floor, DBM B San Miguel, Manila				
Sir/Madam:				
	ly read and accepted the tring its our quotation/s for the ite			in the Request for
Description	Specification	Quantity	Unit Price	Total Price
Pest Control Services	Pest Control Preventive Maintenance for one (1) year	1 lot		
	(Please see attached Annex "B" for the Technical Specifications)			
	Tot	al (inclusiv	e of VAT)	
(Amount	in			Words
_				
The above-quoted pr	rices are inclusive of all costs	and applica	ble taxes.	
Very truly yours,				
Name/Signature	of Representative			
Name of Co	nmnany			

Contact No.

Technical Specifications

Bidders must state here either "Comply" or any equivalent term in the column "Bidder's Statement of Compliance" against each of the individual parameters of each "Specification."

ITEM	1	TECHNICAL SPECIFICATIONS	BIDDER'S STATEMENT OF COMPLIANCE
1.	the int (freque Schedu	control Preventive Maintenance in ernal premises of all DBM buildings ency in accordance with the ule of Requirements), as follows: ag I, II, III and Gym.	
	1. Cont	Pest trol Services	
	1.1	Pest control treatment of cockroach, mosquitoes, flies and other crawling and flying insect; rat and mice control.	
	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.	
	1.3	Application of insecticide in places and areas where insects/pest congregate, crawl and hide including cracks and crevices where they enter as well as undersides of furniture and appliances.	
	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.	
	1.5	General survey and thorough inspection of the entire premises to determine the location of other	

- unforeseen breeding sites of flying insects.
- 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 chemical/solutions used in spraying/misting.
- 1.7 Inspection of the entire area most particularly kitchen the area. ceilings storerooms, and other potential harborage to determine the species of pest, their feeding habits and harborage. To check signs of infestation. including dropping, damages, urine, runs, foot prints, smear and nests.
- 1.8 Regular inspection of all baits trays and baits stations installed at regular intervals as indicated on the rodents. location map whenever necessary. This is aimed to determine the "bait total intake" and ensure non-recurrence of infestations and to replenish baits whenever necessary.
- 1.9 Set up rodentical 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 and mouse traps and glue boards around the perimeter area of the building where poison baits are not appropriate.
- 2. Safety Measures in the use of Pesticide Chemicals/Solutions

Name	of Company/Bidder Signature Over Printed Name of Date Representative
I here	by certify to comply with all the above Technical Specifications.
	Submission of a monthly accomplishment report/checklist to AS-GSD indicating therein the areas that were treated and monitored, duly confirmed/acknowleged by the DBM representative present during the treatment.
4.	Reports
	In every treatment to be conducted by the Supplier, the chemicals/solutions to be used shall be subject to prior inspection and approval of the AS-GSD.
3.	Inspection of Chemicals/Solutions to be Used
	4. The Supplier shall ensure that all office areas, including floorings, walls, office furniture and fixtures, etc., will have no stain marks or droplets of chemicals/solutions used.
	3. The Supplier shall follow all safety precautions in the application and handling of all pesticide and termicide chemicals/solutions.
	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.
	Chemicals/solutions to be used by the Supplier must be approved by the Food and Drug Administration FDA).

Schedule of Requirements

The delivery schedule expressed as weeks/months stipulates hereafter the date of delivery to the project site.

ITEM	SCHEDULE OF REQUIREMENTS	DELIVERY DATE (DBM Buildings 1, 2, 3 and Multi Purpose Building)
1.	A. Pest Control Preventive Maintenance	
	1. Flying and Crawling Insects/Pests:	
	1.1 Residual insect control pesticide services to eradicate nuisance insect pests.	Twice a month
	1.2 Spray treatment for cracks and crevices, undersides of furniture and appliances.	Twice a month
	1.3 Misting of hallways, ornamental plants and other facilities.	Weekly
	1.4 Thermal fogging of hallways, ornamental plants and other facilities.	Monthly
	1.5 Placement of insecticidal bait/gel in all pantry, DBM Canteen and Executive Lounge area, all comfort room/stockroom and electrical room areas.	Monthly
	2. Rodents (rats and mice)	
	2.1 Install rodent glue and trip cage traps in locations that serve as entry point/access for rodents.	Twice a month
	2.2 Install of mapped and numbered pitch-fiber baiting stations.	Twice a month
2.	Inspection of Chemicals/Solutions to be Used In every treatment to be conducted by the	As necessary

	Supplier, the chemicals/solutions to be used shall be subject to prior inspection and approval of the AS-GSD.	
3.	Submission of a monthly accomplishment report to AS-GSD indicating therein the areas that were treated and monitored, duly confirmed/acknowledged by the DBM representative present during the treatment	,

hereby certify to comply and deliver all the above requirements.						
Name of Company/Bidder	Signature Over Printed Name	Date				

Omnibus Sworn Statement

REPUBLIC OF THE PHILIPPINES)		
CITY/MUNICIPALITY OF)	S.S	3

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 he	ereunto set my hand this day of, 20 at
, Philippines.	
	Ridder'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			aring thereon, with no at	and
Witness my hand ar	nd seal this day	of [month] [year]		
NAME OF NOTA Serial No. of Comm Notary Public for _ Roll of Attorneys N PTR No, [date is IBP No, [date is	nission until o. ssued], [place issue	- d]		
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