



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 "*Preventive Maintenance of Automatic Fire Sprinkler System*," in accordance with Section 53.9 of the Implementing Rules and Regulations of Republic Act No. 9184.

Name of Project : Preventive Maintenance of Automatic Fire Sprinkler System

Approved Budget for the Contract : One Hundred Eighty-Five Thousand Pesos (P185,000.00)

Specifications : See attached Terms of Reference

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

Delivery Date : For a period of three (3) months from the date of receipt and acceptance of Notice to Proceed

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 bidder with 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 **November 12, 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,


THEA MARIE CORINNE F. PALARCA
OIC- Director, Administrative Service

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
Preventive Maintenance of Automatic Fire Sprinkler System	Preventive Maintenance of Automatic Fire Sprinkler System for a period of three (3) months (Please see attached Terms of Reference)	1 lot		
Total (inclusive of VAT)				

(Amount in Words)

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

Very truly yours,

Name/Signature of Representative

Name of Company

Contact No.

TERMS OF REFERENCE

I. Scope of Services

Provision for Preventive Maintenance of Automatic Fire Sprinkler System installed to the following DBM office buildings:

- Building I
- Building II
- Building III

II. Deliverable

1. The Contractor shall provide a mechanical engineer and a safety officer who will be assigned during the preventive maintenance activities of the DBM's Automatic Fire Sprinkler System:

- i. Physically and mentally fit, as evidenced by a medical certificate;
- ii. Duly trained safety officer with Safety Training Certificate from any accredited Department of Labor and Employment independent training and safety organization; and
- iii. Professional Regulation Commission licensed mechanical engineer.

The Contractor shall be required to submit to the Director of the Administrative Service a sworn statement attesting compliance to item II of this TOR.

2. Monthly Maintenance Activities

2.1 Automatic Sprinkler

2.1.1 Check/inspect the system to ensure the following:

- No leakage and corrosion
- Free of foreign materials and paint and physical damage
- In proper orientation of the setting/operation system

2.1.2 Check and test floor by floor drain valve water flow and proper system pressure

2.2 System Piping, fittings and hangers

2.2.1 Check/inspect to ensure the good running condition of the system

2.2.2 Clean fittings, hangers and repaint rusty pipes

2.2.3 Monthly system flushing

2.3 Pump Operation

2.3.1 Check/inspect fire and jockey pumps and test by using by-pass line to verify the following:

- Pumps run in automatic and manual mode
- Pumps cut-in and cut-out pressure are being met

- Pumps are running in good operating condition for at least 10 minutes
- 2.3.2 Cleaning/repainting of corroded parts
- 2.3.3 Cleaning of pump house and ensure that no obstruction material in the area

2.4 Pump System Condition

- 2.4.1 Check/inspect the following:
- Pump suction and discharge valves are fully open
 - Suction and discharge pressure gauge have accurate readings
 - Suction and reservoir is full with fill level sensor is in good working condition
 - Piping is free from leaks

2.5 Control Valves

- 2.5.1 Check/inspect the control valve to ensure that it is secured as to its normal position, identification signs and lock are in control.
- 2.5.2 Check/inspect for any sign of corrosion pipes, support, brackets and hangers should be completed and make necessary corrections to mirror defects found.
- 2.5.3 Close and re-open valve to test the tamper switches.
- 2.5.4 Lubricate stem, close and re-open the valve to test and distribute the lubricant.

2.6 Alarm Valves

- 2.6.1 Check/inspect the following to ensure that the alarm valve is in good running condition:
- Gauges indicate normal supply of water pressure maintained
 - Valve is free of physical damage
 - Main drain valve operates properly
 - Alarm gong is functional

- 2.7 **Fire Department Connection** - Contractor shall inspect/verify to ensure visible and accessible fire department connection in the area

3. Other Terms and Conditions

1. The contractor shall submit a checklist form for all activities done for the period signed by the contractor's authorized engineer noted and accepted by the AS Director or her authorized representative.
2. The contractor shall submit detailed report for any defects/malfunctioning of the system and shall rectified same only upon instructions of the Director, AS or duly authorized representative.
3. Record any defects in a logbook and upon repair/completion, a certificate of testing that the Automatic Fire Sprinkler System is in good running condition to be issued to the DBM.

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4. Maintain records/logbook for all the works that has been carried out by the Contractor's Service Engineer.
5. The contractor shall be fully responsible to maintain continues performance of system and in satisfactory working condition.
6. Response time for emergency calls due to system failure/false alarm shall be not later than four (4) hours upon notice/call during working hours and services when needed within 24 working hours from the time of request.
7. The contractor shall be responsible and liable for the cost of repair due to damages caused by its own staff while conducting its maintenance work.
8. Monthly payment shall be made every end of the month upon submission of monthly reports for maintenance work done acknowledge receipt by AS-GSD authorized representative, Invoice for the period.

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

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 _____