



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 "**Supply and Delivery of Drinking Water**" in accordance with Section 53.9 of the Implementing Rules and Regulations of Republic Act No. 9184.

- Name of Project : **Supply and Delivery of Drinking Water**
- Approved Budget for the Contract : Three Hundred Eighteen Thousand Seven Hundred Fifty Pesos (Php318, 750.00)
- Specifications : See the attached Annex "B" for the Technical Specifications
- Location : G/F DBM Building III, Gen. Solano St., San Miguel, Manila
- Delivery Date : **Drinking Water:** Weekly Delivery of 300 containers of purified drinking water within ten (10) working days upon receipt of Notice to Proceed until December 31, 2019
Hot and Cold Water Dispenser: One time delivery within ten (10) working days upon receipt 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 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 **August 7, 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

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	Technical Specifications	Quantity	Unit Price	Total Price
Supply and Delivery of Drinking Water	See Annex "B" for the Technical Specifications and Annex "C" for the Schedule of Requirements.	1 lot		

(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.

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 Number	Specifications	Bidder's Statement of Compliance
1.	Purified Drinking Water - 300 containers/week	
2.	Minimum of eight (8) stages purification/ filtration process approved by Food Drug Administration (FDA)	
3.	Content: 5 gallon per bottle	
4.	Shape and quality of bottle: Presentable, round and polycarbonate resin type and One-time use of bottle cap	
5.	<p>Forty-two (42) units of hot and cold water dispenser with minimum specification:</p> <ul style="list-style-type: none"> - Power source 220V/60Hz - Heating Rated Power: Standard - Cooling Rated power : Standard - Free standing water dispenser - Color: White - Brand new or not more than 2 years <p>Note: Dilapidated dispensers shall be rejected at the time of delivery of dispensers, to ensure that the dispensers are safe to use, the water directly from it shall be tested at the cost of the supplier. Dispensers that will not pass the water potability test shall be rejected. The DBM shall identify the testing center.</p> <p>Dispensers shall be returned to the supplier upon contract completion</p>	
6.	Manual monthly cleaning of all hot and cold water dispensers every last Saturday or Sunday of the month	
7.	Provision for closed delivery van/truck	
8.	Automated water refilling process, pressurized cleaning and disinfecting of empty bottles	
9.	Individual plastic wrapper for each bottle	
10.	Monthly submission of Microbiological Water Test Laboratory Certificate and semi-annual submission of Chemical and Physical Water Test Laboratory Certificate from a water-testing laboratory duly accredited by the DOH or the FDA	
11.	Random sampling of at least 30% (12 dispensers/month) water samples done not more than twelve (12) times within the contract period, done after the scheduled monthly cleaning, which shall be jointly conducted by the Supplier and the DBM, and sent to an accredited water-testing laboratory, with costs chargeable to Supplier	
12.	Supplier shall have a valid Sanitary Permit/s for the duration of the contract	

13.	<p>One (1) on call technician to repair defective water dispensers with response time of not more than four (4) hours from verbal or written notification.</p> <p>In the event that the defective water dispenser cannot be repaired onsite, the supplier provide a temporary replacement unit.</p> <p>Water dispenser beyond repair shall be replaced with new units within twenty-four (24) hours.</p>	
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I hereby certify to comply with all the above Technical Specifications.

**Name of Company/Bidder
Date**

Signature Over Printed Name of Representative



Schedule of Requirements

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

Item	Description	Quantity	Delivery Date**
1.	Provision Five-gallon Purified Drinking Water	300 containers/ week regular delivery day to be advised by the AS-GSD	Within ten (10) working days from receipt of Notice to Proceed to be delivered to the DBM – Administrative Service
2.	Provision of brand new or not more than two (2) years and/or in good running condition hot and cold water dispenser	42 units	
3.	Monthly cleaning of all hot and cold water dispenser	42 units	Every last Saturday or Sunday of the month
4.	Monthly submission of Microbiological Water Test Laboratory Certificate and semi-annual submission of Chemical and Physical Water Test Laboratory Certificate from a water-testing laboratory duly accredited by the Department of Health (DOH) or the Food and Drug Administration (FDA)		Every month attached to the monthly billing

Note: May increase or decrease the quantity upon written advice from the AS-GSD

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

Name of Company/Bidder
Date

Signature Over Printed Name of Representative

**CHECKLIST OF ELIGIBILITY AND TECHNICAL
DOCUMENTS FOR SUBMISSION**

Class "A" Documents

(1) Legal Documents

- PhilGEPS Registration Number
- Mayor's/ Business Permit
Note: For individuals, only the BIR Certificate of Registration shall be submitted in lieu of Mayor's Permit.
- Income/ Business Tax Return (For ABCs above P500K)

Note: PhilGEPS Platinum Certificate of Registration may be submitted in lieu of the Mayor's Permit and PhilGEPS Registration Number.

(2) Technical Documents

- Omnibus Sworn Statement
- Authority of the Signatory

Class "B" Documents

- JVA or the Duly Notarized Statement in accordance with Section 23.1(b) of the 2016 Revised IRR, if applicable.

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 ____