



SUBIC BAY METROPOLITAN AUTHORITY PROCUREMENT AND PROPERTY MANAGEMENT DEPARTMENT

Room 201 Bldg. 255, Barryman Road, Subic Bay Freeport Zone, Philippines
Tel. Nos. (047) 252-4503/4124/4211/4283/4230/4214/4424/4282 Fax No. (047) 252-4284/4251

General Quality Form
PPD-CF-08-02
Rev. No. 04
Effectivity Date: 10-30-2020

QUOTATION FORM

You may send your quotation via email to sbmapcmd@gmail.com email with "cc/bcc" WILL NOT BE ACCEPTED.

Approved Budget for the Contract: P550,000.00

For inquiries, contact: dolly at Tel. No. (047) 252- 4211

REFERENCE: 0 0 0 0 7 - 2 3 - 0 3 1 0 - 0 0 8 7

<p>This is a "REQUEST FOR QUOTATION" for items listed below. Pls submit your quotation not later than <u>4 APRIL 2023</u>. Please note that quotation submitted beyond the deadline given above, will not be considered.</p>	<p>TERMS: ✓ Payment: _____ <i>days</i> * ✓ Delivery: _____ <i>calendar days</i></p>
<p>DELIVERY POINT: <u>PPMD RECEIVING SECTION</u> <u>Bldg 709, Burgos Street, Subic Bay Freeport Zone</u> If FOB destination or others, pls. indicate the estimated freight cost.</p>	<p>TO SUPPLIER: IS YOUR PRICE QUOTATION EXCLUSIVE OF VAT? <input type="checkbox"/> YES <input type="checkbox"/> NO</p>

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
1	RENEWAL OF SUBSCRIPTION FOR SBMA WEB-BASED E-MAIL AND COLLABORATION SYSTEM PERIOD COVERED: MAY 1, 2023 TO FEBRUARY 28, 2024 INCLUSION: GOOGLE WORKSPACE ENTERPRISE STANDARD FOR 100 ACCOUNTS (SEE ATTACHED TERMS OF REFERENCE)	1	LO *			

<p>* COMPANY NAME: _____ * MAILING ADDRESS: _____ * TEL NO.: _____ FAX NO.: _____ E-MAIL ADD: _____</p>	<p>* GRAND TOTAL: _____</p>
<p>CERTIFICATION: I hereby certify that I have personally quoted the price/s of the item/s mentioned above and further attest that the validity is 30 working days upon signing, unless otherwise stated herein. We acknowledge that our failure to indicate that the aforementioned bid amount is exclusive of VAT shall result to a presumption that the bid amount is inclusive of VAT and other taxes.</p>	<p>CERTIFICATION: I hereby certify that I have personally canvassed/verified the price/s of the item/s mentioned above.</p>
<p>_____ * Signature over printed name Date Designation (Authorized Company Personnel)</p>	<p>_____ Signature over printed name Date (Canvasser)</p>
<p>Opened by: _____ Witnesses: _____ Date: _____</p>	

IMPORTANT NOTICE TO SUPPLIER/CONTRACTOR:

Please answer all required data marked with *.

Under RA 7227, SBMA is exempted from VAT.

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
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NOTICE TO SUPPLIERS:

You may submit price quotations through any of the following

- *PERSONAL submission * COURIER
- *FACSIMILE (acceptable for PR with ABC of less than P50,000)
- *CASH ON DELIVERY (COD) Payment Terms is not acceptable (GPBB Volume 2 Manual of Procedures).

Suppliers are highly encouraged to personally attend the opening of bids/quotations. Please confirm schedule with the Technical Section at (047) 252-4503.

PERFORMANCE AND WARRANTY SECURITIES:

- *Performance Security is required for Services/Services & Materials/Equipment with contract price of P500,000.00 and Above;
- *Warranty Security is required for Services & Materials/Equipment with contract price of P300,000.00 and Above, EXCEPT for those deliverables that are out-rightly Consumed within the date of delivery/rendering of services.

* COMPANY NAME: _____ * MAILING ADDRESS: _____ * TEL NO.: _____ FAX NO.: _____ E-MAIL ADD: _____			* GRAND TOTAL: _____
CERTIFICATION: I hereby certify that I have personally quoted the price/s of the item/s mentioned above and further attest that the validity is 30 working days upon signing, unless otherwise stated herein. We acknowledge that our failure to indicate that the aforementioned bid amount is exclusive of VAT shall result to a presumption that the bid amount is inclusive of VAT and other taxes.	CERTIFICATION: I hereby certify that I have personally canvassed/verified the price/s of the item/s mentioned above.	Opened by: _____ Witnesses: _____ Date: _____	
_____ * Signature over printed name Date Designation (Authorized Company Personnel)	_____ Signature over printed name Date (Canvasser)		