



SUBIC BAY METROPOLITAN AUTHORITY PROCUREMENT AND PROPERTY MANAGEMENT DEPARTMENT

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

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

QUOTATION FORM

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

Approved Budget for the Contract: _____

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

REFERENCE: 0 0 0 1 7 - 2 3 - 0 3 2 3 - 0 1 0 5

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

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
	SERVICES AND MATERIALS:	0	*			
1	ROLLER, PLATEN	1	PC	*		
2	ROLLER, CLEANING	1	PC	*		
3	ROLLER, MAG	1	PC	*		
4	SUPPLY SPINDLE RFID MOTOR DTC4500	1	PC	*		
5	RIBBON SENSOR	1	PC	*		
6	HEAD LIFT ASSEMBLY/CABLE AFTER S/N B1490866	1	PC	*		

NOTE: FOR ID PRINTER, MODEL DTC4500 DUAL SIDE WITH SERIAL#B4330413

<p>* COMPANY NAME: _____</p> <p>* MAILING ADDRESS: _____</p> <p>* TEL NO.: _____ FAX NO.: _____ E-MAIL ADD: _____</p>	<p>* GRAND TOTAL:</p> <p>_____</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>_____ * Signature over printed name Date Designation (Authorized Company Personnel)</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 (Canvasser)</p>
<p>Opened by: _____</p> <p>Witnesses: _____</p> <p>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: _____			* GRAND TOTAL: _____
* MAILING ADDRESS: _____			
* TEL NO.: _____	FAX NO.: _____	E-MAIL ADD: _____	
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 (Authorized Company Personnel)	Date	Designation	Signature over printed name (Canvasser) Date

IMPORTANT NOTICE TO SUPPLIER/CONTRACTOR:

Please answer all required data marked with *.

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