



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

QUOTATION FORM

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

Approved Budget for the Contract: P112,000.00

For inquiries, contact: **CAROL DIWA** at Tel. No. (047) 252- **4211** REFERENCE: 0 0 0 3 4 - 2 3 - 0 4 1 9 - 0 1 2 5

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

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
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1	DIGITAL ADVERTISEMENT AD PLACEMENT WITH ARTICLE ON WEBSITE AND FACEBOOK PAGE FOR THE PROMOTION & MARKETING OF SUBIC BAY TARGET DATE OF POSTING 3RD – 4TH QUARTER OF CY2023	1	LO *			
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SPECIFICATIONS:
 SECTION: LIFESTYLE TRAVEL OR ON THE RADAR BANNER/LEAD LANDSCAPE FORMAT 800 x 533PX
 KVs IMAGES AND CAPTIONS

- TERMS AND CONDITIONS:**
1. LAYOUT AND ARTICLE TO BE PROVIDED BY THE AWARDED SUPPLIER. REFERENCE MATERIALS C/O SBMA TOURISM.
 2. LAYOUT AND ARTICLE SUBJECTS TO APPROVAL OF THE SBMA TOURISM BEFORE POSTING AND ADVERTISING.
 3. ADVERTISEMENT SHOULD APPEAR ON THE WEBSITE AND FACEBOOK PAGE OF THE SUPPLIER. ONE TIME ADVERTISEMENT.

* <input checked="" type="checkbox"/> COMPANY NAME: _____ * <input checked="" type="checkbox"/> MAILING ADDRESS: _____ * <input checked="" type="checkbox"/> TEL NO.: _____ FAX NO.: _____ * <input checked="" type="checkbox"/> 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.
<input checked="" type="checkbox"/> _____ Date <input checked="" type="checkbox"/> Designation * Signature over printed name (Authorized Company Personnel)	_____ Date Signature over printed name (Canvasser)
Opened by: _____ Witnesses: _____ _____ _____ Date: _____	

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
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4. TARGET DATE OF POSTING: 3RD TO 4TH QUARTER OF CY2023. SBMA MAY RESCHEDULE OR CANCEL SAID ADVERTISEMENT WITH DUE NOTIFICATION (AT LEAST TWO WEEKS PRIOR THE SCHEDULE) SHOULD THERE BE ANY UNFORESEEN EVENTS OR INSTRUCTIONS.
5. ONLY ACTUAL DELIVERIES WILL BE PAID BY SBMA
6. FOR INQUIRIES / ADDITIONAL INFORMATION, PLEASE CONTACT MS. MARY GRACE ACABA OR MR. TRISTAN K. MADI OF SBMA TOURISM DEPT. AT TELEPHONE NUMBER (047) 252-4132.

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.

*****PLEASE FILL UP PAGE 1-2; COMPLETE ALL DETAILS WITH CHECK MARKINGS**

*****SEND / ATTACH DOCUMENTARY REQUIREMENTS NEEDED SUCH AS:**

- UPDATED BUSINESS PERMIT CY 2023
- OMNIBUS SWORN STATEMENT (SIGNED / NOTARIZED)
- SAMPLE OFFICIAL RECEIPT
- PHILGEPS REGISTRATION / CERTIFICATION

<input checked="" type="checkbox"/> * COMPANY NAME: _____ <input checked="" type="checkbox"/> * MAILING ADDRESS: _____ <input checked="" type="checkbox"/> * TEL NO.: _____ FAX NO.: _____ <input checked="" type="checkbox"/> E-MAIL ADD: _____	* GRAND TOTAL: _____ <input checked="" type="checkbox"/>
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Opened by: _____ Witnesses: _____ _____ _____ Date: _____	