Development Authority BASES CONVERSION AND DEVELOPMENT AUTHORITY

2/F Bonifacio Technology Center, 31st Street Bonifacio Global City, Taguig City

Tel. No. 8575-1700 loc. 1782/1784

Email: samateo@bcda.gov.ph

REQUEST FOR QUOTATION

Company Name: ____

Date : **2 July 2025** PR #: **PR0001435**

Please quote your lowest price(s) using this form, or your letterhead. Also, take note of the following details:

1) Quotation/s shall be addressed to the Head of Procurement Division. Please indicate Solicitation or Reference No.

- 2) Send the said quotation/s to BCDA or fax the same at no. 8575-1785 not later than <u>8 July 2025</u>.
- 3) Quotation/s submitted after the set deadline indicated in item no. 2 shall not be accepted/considered.

4) The quotation/proposal shall be properly signed by the authorized representative and/or the immediate supervisor.

BCDA reserves the right to accept or reject any or all of the quotations, or waive formally therein, or to accept quotation/s as may be considered most advantageous to the govt., or to pursue appropriate legal action should the winning bidder refuse to accept the average without justifiable reason/s.



A CLAR ANES

Chief Administrative Officer

TO: BCDA HEAD OF PROCUREMENT Per Request, Below is/are the price(s) of the article(s)/services(s) as indicated under Unit Price:

QTY (A)	UNIT	DESCRIPTION/SPECIFICATIONS	UNIT COST (ex- VAT) (B)	VAT (C)	TOTAL UNIT COST (D = B + C)	TOTAL AMOUNT (AxD)
3	PIECE	ACRYLIC BIDDING BOX Specifications: Material: - Acrylic Box - 6 mm thick Clear Acrylic with 13 x 4.25" Slot for Paper at Top with Door Opening at Front (acrylic hinges and metal lock) to fit Long Envelope with UV DTF Print of Logo and Label - Wooden Base - 1 ¾" thick Plywood & hardwood senepa with veneer laminate with Swivel Caster Wheels Size: Length - 2.5 ft Width - 2 ft Height - 3.5 ft Packaging: Individual PE Foam in Maser Carton (Approved Budget for the Contract PHP50,000.00 per Box				
				TOTAL AMOUNT		P

Documentary Requirements upon submission of quotation:

1) Valid Mayor's/Business Permit

2) PhilGEPS Registration No.

3) BIR Certificate of Registration (BIR Form 2303)

4) Omnibus Sworn Statement and Proof of Authorization

(Upon notification of Notice of Award-winning bidder must submit within 5 working days the duly NOTARIZED OSS and Proof of Authorization, e.g., Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable)

Terms and conditions:

Price : (Inclusive of all applicable taxes) Payment : NET Thirty (30) working days or C.O.D. Delivery : 30 day/s (upon conforme of P.O.) Validity of price : one month Warranty : _____

Development Authority BASES CONVERSION AND DEVELOPMENT AUTHORITY

2/F Bonifacio Technology Center, 31st Street Bonifacio Global City, Taguig City

Tel. No. 8575-1700 loc. 1782/1784

Email: samateo@bcda.gov.ph

REQUEST FOR QUOTATION

Company Name: ____

Date : 2 July 2025 PR #: PR0001435

Please quote your lowest price(s) using this form, or your letterhead. Also, take note of the following details:

1) Quotation/s shall be addressed to the Head of Procurement Division. Please indicate Solicitation or Reference No.

- 2) Send the said quotation/s to BCDA or fax the same at no. 8575-1785 not later than **8 July 2025**.
- 3) Quotation/s submitted after the set deadline indicated in item no. 2 shall not be accepted/considered.

4) The quotation/proposal shall be properly signed by the authorized representative and/or the immediate supervisor.

BCDA reserves the right to accept or reject any or all of the quotations, or waive formally therein, or to accept quotation/s as may be considered most advantageous to the govt., or to pursue appropriate legal action should the winning bidder refuse to accept the award without justifiable reason/s.



ALTYIRA CLARIANES Chief Administrative Officer

We hereby certify, that we have prepared, checked and reviewed this quotation. This quotation is valid unless revoked in writing which should be done prior to our receipt of the Purchase Order or Job Order.

Printed Name/Signature/Date

Immediate Supervisor

Telephone / Fax Number