



Republic of the Philippines
Province of Pampanga
Bids and Awards Committee
Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

NOV 20 2024

RFQ No. **241151**
P.R. No. / Date / End User / Purpose:
(24-5751/11/13/2024 PHO Consolidated Plumbing Supplies for District Hospitals for Three (3) months)

REQUEST FOR QUOTATION
Small Value Procurement

Company Name: _____
Address: _____
Tel. No.: _____

Please quote your lowest price for the requirements listed hereunder subject to the Terms and Conditions stated below and submit to this Office duly signed by you or your representative not later than **4:00 p.m. NOV 26 2024**

APPROVED BUDGET FOR
THE CONTRACT (ABC):
Php 173,125.00

FRANCIS V. MASLOG
CHAIRPERSON
Bids and Awards Committee

TERMS AND CONDITIONS

- All quotations may be typewritten or handwritten, placed in a sealed envelope.
- All quotations shall be valid for one hundred twenty (120) calendar days from the deadline of the submission of the same.
- Any erasures or overwriting shall be valid only if they are signed or initialed by the supplier or its authorized representative.
- Interested suppliers are required to submit their valid current Mayor's Permit, PhilGEPS Registration Number, and Income/BIR Tax Return (for ABCs above P500,000.00) upon submission of quotation. In lieu of the Mayor's Permit and PhilGEPS Registration Number, the PhilGEPS Certificate of Platinum Membership may be submitted. For new businesses, submit the BIR Certificate of Registration and latest quarterly return or percentage tax..

- The applicable rate for late deliveries is one tenth (1/10) of one percent (1%) of the cost of the unperformed portion for everyday of delay.
- The Provincial Government of Pampanga reserves the right to accept or reject any quotation, and to annul the procurement process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected supplier/s.
- The PGP also reserves the right to waive any required formality in the proposals received, and select the proposal which it determine to be the most advantageous to the government.

Item No.	Qty	Unit	Item Description	Unit Price	Total Price
1	13	pc	Angle Valve 1/2" x 1/2"		
2	15	pc	Angle Valve 3/8" x 1/2"		
3	13	pc	Angle Dual Valve 1/2" x 1/2" 1/2"		
4	4	pc	Angle Dual Valve 1/2" x 1/2" x 3/8"		
5	5	pc	Adaptor with Thread 1/2" PVC		
6	3	pc	Ball Valve 1/2" GI		
7	3	pc	Ball Valve 3/4" GI		
8	10	set	Bidet set stainless with hose		
9	5	pc	Coupling, PVC blue 1/2"		
10	20	pc	Elbow with Thread , 1/2" PVC		
11	5	pc	Faucet, bronze 1/2"		
12	30	pc	Faucet, Gooseneck		
13	50	pc	Faucet, Hose Bib , stainless 1/2"		
14	20	pc	Faucet, Ordinary 1/2"		
15	4	pc	Faucet Wall Type, stainless 1/2"		
16	12	pc	Flexible Hose 1/2" x 1/2" x 12"		
17	30	pc	GI Coupling 1/2"		

Item Description

			Unit Price	Total Price
	pc	GI Nipple 1" x 1/2"		
19	4	pc	GI Nipple 2" x 1/2"	
20	4	pc	GI Nipple 3" x 1/2"	
21	4	pc	GI Nipple 4" x 1/2"	
22	8	pc	GI Plug 1/2"	
23	12	pc	GI Cup 1/2"	
24	5	pc	P-Trap 1"	
25	5	set	Toilet Bowl with Tank	
26	11	pc	Toilet Flapper	
27	10	set	Tank Fittings Side Flush	
28	20	set	Tank Fittings Push Button	
29	10	roll	Thread Seal Tape 3/4"	
30	15	roll	Thread Seal Tape 1/2"	
31	20	pc	Union Patente 3/4"	
32	20	pc	Union Patente 1/2"	
		TERMS OF REFERENCE: 1. The procuring entity reserves the right to conduct product testing/inspection to determine the fitness of the items being offered by prospective suppliers.		
		AFTER SALES SERVICE: 1. Six (6) months warranty on manufacturing defects except items no. 29 and 30. 2. Replacement of defective items within 24 hours upon notification by the end user		
		SCHEDULE OF REQUIREMENT: 1. Delivery within ten (10) calendar days upon receipt of PO/NOA.		
			Total Lot Price	

Note: The winning supplier shall submit a duly signed and notarized Omnibus Sworn Statement prior to notice of award.

THE BIDS AWARDS COMMITTEE:

Having carefully read and accepted your Terms and Conditions, including the technical specifications, I/We offer to supply/deliver the item/s as noted above.

 Supplier's authorized representative signature over printed name
 Designation: _____
 Contact No.: _____
 Email Address.: _____

 BAC CANVASSER

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