



NATIONAL TRANSMISSION CORPORATION
 CORPORATE SERVICES GROUP
 TransCo Annex Bldg., Diliman, Quezon City
 Tel. No. 902-1521/Fax No. 914-6209

**SUPPLIER'S TECHNICAL/PRICE QUOTATION FORM
 (NEGOTIATED PROCUREMENT: SMALL VALUE PROCUREMENT)**

REFERENCE NO.: GSD-17-95152(ECA)

FOR INQUIRIES, CONTACT PURCHASING OFFICER: **ARGAÑOZA, EILEEN**

Sir/Madam:

Please provide us with your best quotation and submit the same to the above assigned purchasing officer on or before 3:00 PM on quote closing date at ADMINISTRATION OFFICE, Ground Floor, TRANSCO Main Building, Power Center, Quezon Avenue corner BIR Road, Diliman, Quezon City.

QUOTE CLOSING DATE/TIME: APRIL 24, 2017/3:00 P.M.

Deadline for submission may be extended if there are insufficient offers received. In case of a failed canvass, a re-canvass may be conducted without prior notice to any previous offeror (s).

Offers may be submitted in a sealed envelope, through fax or **through e-mail (ecarganoza@transco.ph)** at the option of the offeror, properly marked with the reference number. This bid document comprises THREE (3) pages including this sheet.

Please signify your acceptance of the TERMS AND CONDITION as stated herein, by signing on the space provided below and submit the signed copy together with your separate letter of quotation (as applicable).

Very truly yours,

ROSSANA F. PAGUIO
 Manager, General Services Division

NOTE: THIS FORM IS COMPUTER GENERATED. SIGNATURE IS NOT REQUIRED

NO.	DESCRIPTION	QUANTITY	ABC (VAT INC)	UNIT PRICE	TOTAL PRICE
				(VAT EXCLUSIVE, INDICATE APPLICABLE 12% VAT)	
1	<p>SUPPLY OF LABOR, MATERIALS & TECHNICAL SUPERVISION TO UNDERTAKE GENERAL PEST CONTROL AND TERMITE INTERCEPTION & BAITING SYSTEM</p> <p>COVERAGE PERIOD: MAY 1, 2017 TO APRIL 30, 2018 (ONE YEAR)</p> <p>A. SUPPLY OF TECHNICAL LABOR, SUPERVISION, CHEMICALS, TOOLS, TRANSPORTATION AND EQUIPMENT TO UNDERTAKE THE GENERAL PEST CONTROL AREA OF COVERAGE: -TRANSCO MAIN BUILDING (GROUND TO THIRD FLOOR); -TRANSCO ANNEX BUILDING (GROUND TO THIRD FLOOR); -TRANSCO DORMITORY BUILDING (GROUND TO SECOND FLOOR) -TRANSCO PERIMETER AREAS; -TRANSCO JANITORIAL OFFICE AND</p>	1 LOT	₱300,000.00		

STORAGE AREA

METHOD OF TREATMENT:

-MISTING, COLD/DRY FOGGING, RODENT CONTROL, RESIDUAL SPRAYING.

1. RESIDUAL SPRAYING - THIS SHALL BE TWICE (2X) A MONTH OF RESIDUAL PESTICIDES TO CRITICAL AREAS AND BREEDING HARBOURAGES OF INSECTS; FOR COCKROACHES, CARPET BEETLES, ANTS AND OTHER CRAWLING INSECTS;
2. MISTING - THIS SHALL BE TWICE (2X) A MONTH TREATMENT OF BROAD SPECTRUM INSECTICIDES WITH THE USE OF ELECTROMISTAEOSOL MACHINE WHICH TRANSFORM SPRAY TO MICRONS (ULTRA FINE CHEMICAL DROPLETS); THIS SHALL BE DONE INSIDE PREMISES OF THE BUILDING;
3. THERMAL/COLD FOGGING - THIS SHALL BE TWICE(2X)A MONTH APPICATION OF VAPORIZED FORMULATED INSECTICIDES THERMAL/COLD FOG: FOR MOSQUITOS, FLIES AND OTHER FLYING INSECTS; THIS SHALL BE DONE OUTSIDE PREMISES OF THE BUILDING;
4. RODENT CONTROL - THIS SHALL BE TWICE (2X) A MONTH APPLICATION OF RAT BAITS AND TRAPPING OF RATS.

B. SUPPLY OF LABOR, MATERIALS & TECHNICAL SUPERVISION TO UNDERTAKE TERMITE INTERCEPTION & BAITING SYSTEM AREA COVERAGE:

- TRANSCO MAIN BUILDING (GROUND TO THIRD FLOOR);
- TRANSCO ANNEX BUILDING (GROUND TO THIRD FLOOR);
- TRANSCO DORMITORY BUILDING (GROUND TO SECOND FLOOR);
- TRANSCO PERIMETER AREAS;
- TRANSCO JANITORIAL OFFICE AND STORAGE AREA

SCOPE OF WORKS:

1. INSTALLATION OF BAIT STATION UNITS IN GROUND AT A MAX. DISTANCE OF 5 METERS ALONG BUILDING PERIMETER AND UNLIMITED ABOVE GROUND (DEPENDS ON TERMITE INFESTATION LOCATION);
2. CONTINUOUS MONITORING OF THE BAITED AND UNBAITED STATIONS ALONG PERIMETER OF BUILDING EVERY 3 WEEKS WITH A TOTAL OF 18 TREATMENTS/INSPECTIONS FOR ONE (1) YEAR.
3. ALL CHEMICALS TO BE USED INDOOR SHOULD BE ODORLESS AND NON TOXIC. SEE ATTACHED 'ANNEX A' FOR REFERENCE. (SUBMIT SAMPLE FOR EVALUATION/ INSPECTION).
4. SUPPLIERS TO SUBMIT WORK PROGRAM AND SITE PLAN INDICATING THE PROPOSED IN GROUND AND ABOVE GROUNDS STATIONS.

5. WITH ONE (1) YEAR WARRANTY ON TREATMENT WHICH WILL COMMENCE ON THE FIRST TREATMENT.

OTHER REQUIREMENTS:
-WINNING BIDDER IS REQUIRED TO GENERATE MONTHLY STATUS REPORT ON THE ON-GOING TREATMENT BOTH IN GENERAL PEST CONTROL AND TERMITE INTERCEPTION BAITING SYSTEM.

NOTE: PROSPECTIVE BIDDERS/SUPPLIERS ARE REQUIRED TO CONDUCT ACTUAL INSPECTION AND SHOULD SECURE CERTIFICATE OF INSPECTION FROM THE END-USER (GSD).

TOTAL AMOUNT (VAT EXCLUSIVE) _____
ADD: APPLICABLE VAT (___%) _____
TOTAL NET AMOUNT (VAT INCLUSIVE) _____

NOTE : ALTERNATE OFFERS ARE NOT ALLOWED
Bids received in excess of the Approved Budget for the Contract (ABC) shall be automatically rejected.
SPECIAL INSTRUCTION: Interested suppliers must view/download the attached document in the Associated Component to be included in the Document Request List (DRL)

FIXED TERMS (PLEASE INCLUDE IN YOUR OFFER):

- BID PRICE VALIDITY: AT LEAST 60 DAYS FROM QUOTE CLOSING DATE
(**VAT EXCLUSIVE, INDICATE APPLICABLE VAT**)
- DELIVERY PERIOD: () 7 CALENDAR DAYS () _____
- DELIVERY POINT: TRANSCO-HO WAREHOUSE, DILIMAN, Q.C.
C/O M. T. JAVILLO
- PAYMENT TERMS: WITHIN 30 CALENDAR DAYS UPON DELIVERY AND SUBMISSION OF COMPLETE REQUIRED DOCUMENTS
- WARRANTY: _____

OTHER REQUIREMENTS/DOCUMENTS TO BE INCLUDED IN THE PROPOSAL:

1. Product brochures/catalog/technical reference.
2. Please indicate **BRAND/MODEL & WARRANTY** for each offer.
3. **PhilGEPS Registration Number/Certificate of PhilGEPS Registration**
4. **DTI/SEC Registration Certificate**
5. **Mayor's Permit/Business Permit**
6. **BIR Certificate of Registration**
7. **Latest Income/Business Tax Return**
8. **Omnibus Sworn Statement (to be submitted by the AWARDEE before issuance of Notice of Award)**
9. Receipts must be BIR compliant (please see below).

Please issue an **Invoice/Receipt** to:

Name: National Transmission Corporation (TransCo)
Address: Power Center Agham Road Corner Quezon Ave., Diliman Quezon City
TIN: 223-242-186-000

If transaction is subject to VAT, kindly show as separate item the VAT amount (12%) in the:

OFFICIAL RECEIPT - for sale of **SERVICES**
SALES INVOICE - for sale of **GOODS or PROPERTIES**

TRANSCO TERMS ACCEPTED: _____
(SIGNATURE AND DATE)

(NAME AND DESIGNATION)

(NAME OF COMPANY)