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: LEASE OF VENUE)

REFERENCE NO.: CCMG-17-95431(ECA)				
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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: 06 October 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.

				UNIT PRICE	TOTAL PRICE
NO.	DESCRIPTION	QUANTITY	ABC	(VAT EXCLUS	IVE, INDICATE
			(VAT INC)	APPLICABL	.E 12% VAT)
001	LEASE OF VENUE, MEALS AND	1 LOT	P 385,000.00		
	ACCOMMODATION FOR THE THREE (3)		-		
	DAY PLANNING SESSION OF				
	CONCESSION CONTRACTS MANAGEMENT				
	GROUP				
	Date: October 16-18, 2017 (3D/2N)				
	No. of Pax: 55				
	TOTAL AMOUNT (VAT EVELLICIVE)				

TOTAL AMOUNT (VAT EXCLUSIVE)

ADD: APPLICABLE VAT (___%)

TOTAL NET AMOUNT (VAT INCLUSIVE)

TECHNICAL SPECIFICATIONS:				
Item Description		Comp	liance	Remarks
I.	AVAILABILITY	YES	NO	
1.	16-18 OCTOBER 2017	[]	[]	
II.	LOCATION	YES	NO	
1.	ZAMBALES	[]	[]	
III.	VENUE	YES	NO	
1. A.	STRUCTURAL CONDITION: THE FOUNDATION IS MADE OF CONCRETE AND STRUCTURAL STEEL MATERIALS OR COMBINATION OF BOTH.	[]	[]	
2. A.	FUNCTIONALITY OF FUNCTION ROOM: FREE USE OF ONE (1) AIR-CONDITIONED FUNCTION ROOM ON: 16-17 OCTOBER 2017 FOR 55 PAX	[]	[]	

B.	ROOM MUST NOT CONTAIN PILLARS	[]	[]	
C.	AMENITIES INCLUDE:			
I.	AT LEAST 2 MICROPHONE UNITS	[]	[]	
II.	AUDIBLE/OPERATIONAL SOUND SYSTEM	ίί	ίí	
III.	PROJECTOR SCREEN AND TABLE FOR LCD	[]	[] []	
	PROJECTOR			
IV.	WHITEBOARD AND/OR FLIPCHART, AND MARKERS	[]	[]	
V.	WAIVED CHARGES FOR USE OF LAPTOPS AND	[]	[] []	
	PROJECTOR			
D.	COMPLIANT WITH THE STANDARDS PROVIDED BY	[]	[]	
	THE BUILDING CODE OF THE PHILIPPINES			
E.	AREA SHOULD ACCOMMODATE AT LEAST 55	[]	[]	
	PARTICIPANTS			
3.	ROOM ARRANGEMENTS:			
A.	AT LEAST QUAD SHARING FOR 47 PAX (12	[]	[]	
	ROOMS) ON 16-18 OCTOBER 2017			
B.	AT LEAST TWIN SHARING FOR 8 PAX (4 ROOMS)			
Б.	ON 16-18 OCTOBER 2017	r 1	Г٦	
4.	FACILITIES:	L J	L J	
Α.	CONTINUOUS WATER SUPPLY & ACCESSIBLE	[]	[]	
Λ.	COMFORT ROOM	LJ	LJ	
В.	COMPLIANCE WITH THE STANDARDS PROVIDED	[]	[]	
ъ.	BY THE BUILDING CODE OF THE PHILIPPINES	LJ	LJ	
C.	ACCESSIBLE EMERGENCY EXIT AND ALARM,	[]	[]	
C.	STANDBY FIRE EXTINGUISHER AND AUTOMATIC	LJ	LJ	
	SPRINKLER			
D.	AVAILABLE TELEPHONE WITHIN THE PREMISES	[]	[]	
υ.	OF THE BUILDING.	LJ	LJ	
E.	ADEQUATE GUARDED PARKING SPACE	гэ	гэ	
F.	FREE WI-FI INTERNET ACCESS	[]	[] []	
G.	24 HOUR FRONT DESK ASSISTANCE		[]	
о. Н.	FREE USE OF INDOOR FACILITIES AND OUTDOOR	[]	[]	
11.	SPORTS FACILITIES	LJ	LJ	
I.	MEDICAL SERVICES:			
1.	ON-CALL NURSE	гэ	гэ	
5.	OTHER REQUIREMENTS:	L J	L J	
Э. А.	PROVISION OF JANITORIAL AND MAINTENANCE	[]	[]	
Α.	SERVICES	LJ	LJ	
В.	AMBIANCE PROMOTES LEARNING	гэ	гэ	
C.	ADEQUATE SECURITY SERVICE (24/7)	[]	[]	
6.	CATERING SERVICES	L J	L J	
	MEALS CONSIST OF THE FOLLOWING:			
A. I.	LUNCH, PM MERIENDA & DINNER ON 16	гэ	гэ	
1.	·	[]	[]	
TT	OCTOBER 2017	гэ	гэ	
II.	BREAKFAST, LUNCH, PM MERIENDA & DINNER ON	[]	[]	
TTT	17 OCTOBER 2017	r 1	г 1	
III.	BREAKFAST ON 18 OCTOBER 2017	[]	[]	
IV.	MAIN COURSE (AT LEAST 1 VARIANT OF MEAT, 1	[]	[]	
	VARIANT OF SEAFOODS AND 1 VARIANT OF			
	VEGETABLES)	r 3	r 3	
V.	RICE	[]	[]	
VI.	DESSERT	_ ,	r 7	
VII.	BEVERAGE/FREE FLOWING COFFEE AND WATER	[]	[] []	
VIII.	MEALS ARE GOOD FOR 55 PERSONS	[]	L J	
В.	DATE AND TIME OF DELIVERY:	_ ,	r 7	
I.	16-18 OCTOBER 2017	1 1 1		

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 () _____

TRANSCOLUD WARFILDUSE DILIMAN O C.

• DELIVERY POINT: TRANSCO-HO WAREHOUSE, DILIMAN, Q.C.

C/O M. T. JAVILLO

REFERENCE NO.: CCMG-17-95431(ECA)

 PAYMENT TERMS: WITHIN 30 CALENDAR DAYS UPON DELIVERY/SERVICES RENDERED AND SUBMISSION OF COMPLETE REQUIRED DOCUMENTS

WARRANTY:

OTHER REQUIREMENTS/DOCUMENTS TO BE INCLUDED IN THE PROPOSAL:

- 1. Product brochures/catalog/technical reference, if applicable.
- 2. Please indicate **BRAND/MODEL & WARRANTY** for each offer, if applicable.

ELIGIBILITY REQUIREMENTS/DOCUMENTS TO BE SUBMITTED BY THE AWARDEE PRIOR TO ISSUANCE OF NOTICE OF AWARD:

- 1. PhilGEPS Registration Number/Certificate of PhilGEPS Registration (for Platinum Membership)
- 2. DTI/SEC Registration Certificate
- 3. Mayor's Permit/Business Permit
- 4. BIR Certificate of Registration
- 5. Latest Income/Business Tax Return
- 6. Receipts must be BIR compliant (please see below).

Please issu	e an Invoice/Receipt to:		
	National Transmission Corporation (TransCo)	TRANSCO TERMS ACCEPTED:	
	Power Center Agham Road Corner Quezon Ave., Diliman Quezon City	TRANSCO TERMO ACCEL TED	(SIGNATURE AND DATE)
TIN:	223-242-186-000		
Iftransactio	on is subject to VAT, kindly show as separate item the	-	(NAME AND DESIGNATION)
VATamount	t (12%) in the:		
OFFICIAL RECEIPT - for sale of SERVICES SALES INVOICE - for sale of GOODS or PROPERTIES		-	(NAME OF COMPANY)