



TransCo

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.: HRD-19-96330(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: MAY 28, 2019/10:00 A.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 TWO (2) 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,

ROGELIO M. MABULAY, JR.

Acting Manager, Procurement Management 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)	
001	EVENT MEDICAL STANDBY TEAM INCLUSIONS: -ONE (1) WELL EQUIPPED AMBULANCE WITH AED (AUTOMATED EXTERNAL DEFIBRILLATOR) ON STANDBY FOR 5 HOURS -ONE (1) TRANSPORT OFFICER AND TWO (2) TREATMENT OFFICERS ON BOARD -FIRST AID STATION SETUP -FREE USE OF BASIC MEDICAL SUPPLIES INCLUDING OXYGEN (EXCEPT AED PADS DURING EMERGENCIES) -FREE TRANSPORT TO THE NEAREST HOSPITALS IN CASE OF EMERGENCY NO. OF DAYS: 15 DAYS MAY 31, 2019 (FRIDAY); 5:00PM onwards JUNE 3, 2019 (MONDAY); 5:00PM onwards JUNE 4, 2019 (TUESDAY); 5:00PM onwards JUNE 6, 2019 (THURSDAY); 5:00PM onwards JUNE 7, 2019 (FRIDAY); 5:00PM onwards JUNE 10, 2019 (MONDAY); 5:00PM onwards JUNE 11, 2019 (TUESDAY); 5:00PM onwards JUNE 13, 2019 (THURSDAY); 5:00PM onwards JUNE 14, 2019 (FRIDAY); 5:00PM onwards JUNE 17, 2019 (MONDAY); 5:00PM onwards JUNE 21, 2019 (FRIDAY); 5:00PM onwards JUNE 24, 2019 (MONDAY); 9:30AM onwards JUNE 25, 2019 (TUESDAY); 1:00PM onwards JUNE 26, 2019 (WEDNESDAY); 12:30PM onwards JUNE 27, 2019 (THURSDAY); 12:30PM onwards	1 LOT	₱82,500.00		

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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.

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

1. **PhilGEPS Registration Number/Certificate of PhilGEPS Registration**
2. **DTI/SEC Registration Certificate**
3. **Latest Mayor’s Permit/Business Permit**
4. **BIR Certificate of Registration**
5. **Latest Income/Business Tax Return (2017 or Latest Annual ITR)**
6. **Notarized Omnibus Sworn Statement**
7. Receipts must be BIR compliant (please see below).



TRANSCO TERMS ACCEPTED: _____
(SIGNATURE AND DATE)

(NAME AND DESIGNATION)

(NAME OF COMPANY)