



NATIONAL TRANSMISSION CORPORATION
RESOURCE MANAGEMENT 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.: NP210713-PP053

FOR INQUIRIES, CONTACT PURCHASING OFFICER: **PINEDA, MA. PILAR L.**

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 PROCUREMENT MANAGEMENT DIVISION, Ground Floor, TRANSCO Main Building, Power Center, Quezon Avenue corner BIR Road, Diliman, Quezon City.

QUOTE CLOSING DATE/TIME: 17 NOVEMBER 2021/3:00 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 (mlpineda@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.

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)	
1.	ROWVIS-21-97134/1 UNINTERRUPTIBLE POWER SUPPLY (UPS) OUTPUT POWER CAPACITY: 300WATTS/500VA NOMINAL OUTPUT VOLTAGE: 230V CONTROL PANEL: LED STATUS DISPLAY WITH ONE LINE, ON BATTERY, REPLACE BATTERY AND OVERLOAD INDICATED AVAILABLE ALARM: ALARM WHEN ON BATTERY, DISTINCTIVE LOW BATTERY ALARM; OVERLOAD CONTINUOUS TONE ALARM STANDARD WARRANTY: 2 YEARS REPAIR OR REPLACEMENT PER TRANSCO'S STANDARD TECHNICAL SPECIFICATIONS REFERENCE: CIRCULAR NO. 2020-05 BRAND/MODEL: _____ WARRANTY: _____	3 UNITS	₱ 15,000.00		

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NO.	DESCRIPTION	QUANTITY	ABC (VAT INC)	UNIT PRICE	TOTAL PRICE
				(VAT EXCLUSIVE, INDICATE APPLICABLE 12% VAT)	
2.	LITVIS-21-97234/1 SHREDDING MACHINE *230V, DESKSIDE *CAN SHRED 15 TO 20 SHEETS *CAN SHRED PAPER, DISKS AND CREDIT CARDS AND CAN COPE PAPER CLIPS AND STAPLES *AUTOMATIC ON/OFF AND BAG FULL AUTO OFF *OIL-FREE, QUIET OPERATION WARRANTY: ONE (1) YEAR BRAND/MODEL: _____ WARRANTY: _____	1 UNIT	₱ 30,000.00		

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):

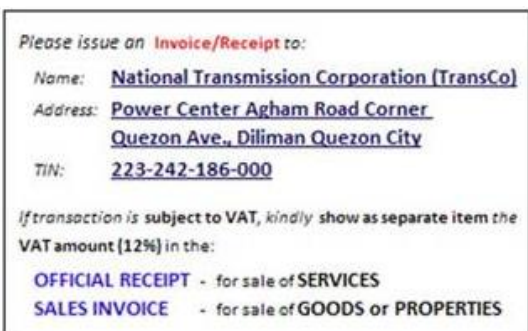
- BID PRICE VALIDITY: AT LEAST 60 DAYS FROM QUOTE CLOSING DATE
(**VAT EXCLUSIVE, INDICATE APPLICABLE VAT**)
- DELIVERY PERIOD: () WITHIN 7 CALENDAR DAYS UPON RECEIPT OF PO
() _____
- DELIVERY POINT: TRANSCO SATELLITE LITIGATION OFFICE-VISAYAS, CEDAVILLE RESIDENCES, NASIPIT, TALAMBAN, CEBU CITY
- PAYMENT TERMS: WITHIN 30 CALENDAR DAYS UPON FULL 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 (for Platinum Membership)
2. DTI/SEC Registration Certificate
3. Mayor's Permit/Business Permit (2021)
4. BIR Certificate of Registration
5. Latest Income/Business Tax Return (2020)
6. Notarized Omnibus Sworn Statement (use applicable form)
7. Receipts must be BIR compliant (please see below).



TRANSCO TERMS ACCEPTED: _____
 (SIGNATURE AND DATE)

 (NAME AND DESIGNATION)

 (NAME OF COMPANY)

 (MOBILE NO. & EMAIL ADD)