



Republic of the Philippines
METRO KIDAPAWAN WATER DISTRICT
 Lanao, Kidapawan City
 Tel nos. (064)577-1533, 577-1865, Fax # (064) 572-5555
 E-mail Address: metrokidapawan_wd@yahoo.com
 Website: www.metrokidapawanwd.gov.ph
 "Committed to Service, Development and Self-Reliance"



REQUEST FOR QUOTATION

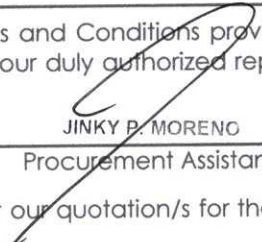
PR No. : 0123-002

DATE : _____

JO No. : _____

Name of Company: _____
 Address: _____
 Business Permit No: _____
 TIN No.: _____

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided at the dorsal portion of this Request for Quotation. Submit your quotation duly signed by you or your duly authorized representative not later than _____, 2023.


 JINKY P. MORENO
 Procurement Assistant A

After having carefully read and accepted the Terms and Conditions below, I/we submit our quotation/s for the item/s as follows:

ITEM #	ITEM DESCRIPTION	Approved Budget of the Contract	OFFER						REMARKS
			PRICE				Compliance with technical specifications		
			QTY.	UNIT	UNIT PRICE	TOTAL	YES	NO	
	PhP: _____	0.00							
1	PAPER, Paper Thermal 57mm x 15m POS	4,500.00	rolls	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>		

GRAND TOTAL: _____

Signature Over Printed Name: _____

Contact Number (Landline/Cellphone)/Email Address _____

Please submit the following requirements:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Mayor's Permit | <input type="checkbox"/> Income Business Tax Return |
| <input type="checkbox"/> Professional License/Curriculum (Consulting Services) | <input checked="" type="checkbox"/> Omnibus Sworn Statements |
| <input checked="" type="checkbox"/> Philgeps Registration Number | <input type="checkbox"/> Manufacturer's PNS |
| <input type="checkbox"/> PCAB License (Infra) | <input type="checkbox"/> DTI Certificate |

OTHER TERMS AND CONDITIONS:

- The mode of payment is within Six (6) months upon issuance of IAR Three (3) months upon issuance of IAR Two (2) months upon issuance of IAR One (1) month upon issuance of IAR.
- Bidders shall provide correct and accurate information required in this form.
- Bidders may quote for any at all times except for one (1) lot requisition.
- Price quotation/s must have:
 - validity - Thirty (30) Calendar days
 - inclusion of tax
 - Quotations exceeding the Approved Budget for the Contract shall be r
 - Award of contract shall be made to the lowest quotation (for goods at
 - Erasures or overwriting is not allowed unless signed by duly authorized representative/s.
- The item/s shall be delivered within Seven (7) days / months from receipt of Notice to Proceed (NTP) with Purchase Order & Notice of Award (NOA) and Job Order Contract & Notice of Award (NOA).
- The awardee shall notify two (2) days before its delivery of goods and services.
- The MKWD shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- Liquidated damages equivalent to one tenth of one percent (0.001%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The MKWD shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.



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TERMS OF REFERENCE

PURPOSE	THERMAL PAPER FOR METER READING, BILLING AND TENDING ACTIVITY USE GOOD FOR THREE MONTHS OF CY 2023 (MARCH - MAY 2023)		
PARTICULARS	<input checked="" type="checkbox"/> PR <input type="checkbox"/> JO No.:	Date:	09-Jan-23

ITEMS, SPECIFICATIONS, AND DESCRIPTIONS	
ITEM 1 Thermal paper SPECIFICATIONS: 1 Size: 57mm x 15m POS 2 Maximum Diameter 38-40 mm 3 Glossy paper, Printout withstand/month 4	ITEM 2 SPECIFICATIONS: 1 2 3 4
ITEM 3 SPECIFICATIONS: 1 2 3 4	ITEM 4 SPECIFICATIONS: 1 2 3 4
ITEM 5 SPECIFICATIONS: 1 2 3 4	ITEM 6 SPECIFICATIONS: 1 2 3 4

Note: For more than 6 items attach separate TOR Form. For More specifications attach necessary supporting document/s.

SOURCE OF FUND	APP/PPMP Item No.:	755
	Account No.:	755

MODES AND TERMS OF PAYMENT	within (180) days after complete delivery
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REQUIRED SERVICES	
<input checked="" type="checkbox"/> Free Delivery <input type="checkbox"/> Free Product Demonstration <input type="checkbox"/> Free Installation	Others specify: INCLUSIVE OF HAULING

REQUIRED CERTIFICATIONS/ PERMITS	BUSINESS PERMIT
	Philgeps Registration
QUALIFICATIONS	N/A

AREA OF DELIVERY	MKWD MAIN OFFICE
DATE OF DELIVERY	MONDAY - FRIDAY
TIME OF DELIVERY	8:00 AM - 3:00PM

WARRANTY PERIOD	N/A
RETENTION	Amount: N/A
	Duration: N/A
TAX INCLUSIVE	YES

OTHER CONDITIONS AND CONSTRAINTS
RETURN ITEM IN CASE OF NON COMPLIANCE

Prepared by: <div style="text-align: center;"> RODIBEE B. TOJO, CPA <small>Requisitioner</small> </div>	Reviewed by: <div style="text-align: center;"> MYRNA R. VICTORIA, MBA <small>Department Manager A</small> </div>
Noted by: <div style="text-align: center;"> WILESPER LISANDRO M. ALQUEZA, CE/RMP/MBA <small>Material Standards Committee Chairman</small> </div>	Approved/Disapproved by: <div style="text-align: center;"> STELLA M. GONZALES, MPS <small>General Manager</small> </div>