



REQUEST FOR QUOTATION

RFQ No:23-09-046
Date:9/4/23

Name of Supplier/Dealer: _____
Address: _____
Contact Number: _____
Philgeps No. _____
TIN _____

Mode of Procurement : SMALL VALUE
PROCUREMENT (SEC. 53.9)

APP Reference: APP No.1 Amended APP

Sir/Madam:

If available in your stock, please quote your lowest price, all taxes included, for the following article/services enumerated below and submit your quotation as soon as possible to this office to the undersigned stating the shortest time which delivery could be made by yourself.

Very truly yours,

AURORA B. MANTILLA
BAC -Chairperson

Terms and Conditions :

1. Price Validity shall be for a period of 30 calendar days from submission of the RFQ.
2. Delivery period within (30 CDs) from receipt of Contract/Purchase Order (PO) or **As indicated schedule below.**
3. Warranty shall be for a period of six (6) months for supplies and materials ; at least 1 year for equipment or as indicated in the product warranty whichever is longer.
4. Bidders must submit the following documentary requirements:
 - 4.1 Mayor's/Business Permit (to be submitted upon submission of offer)
 - 4.2 PhilGEPS Registration Number (to be submitted upon submission of offer)
 - 4.3 Income/Business Tax Return (for ABCs above Php 500,000.00) (to be submitted upon submission of offer)
 - 4.4 Omnibus Sworn Statement (for ABCs above Php 50,000.00) (to be submitted before issuance of Notice of Award)
5. Mode of delivery [] Pick-up; [] Door-to-door delivery at the Civil Service Commission (CSC) Caraga Regional Office, Butuan City.
6. Liquidated Damages : One-tenth (1/10) of one (1) percent of the cost of the undelivered item/s for every day of delay.
7. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
8. The CSC Caraga Regional Office reserves the right to reject any and all bids, declare a failure of bidding, or not award the contract at any time prior to contract award in accordance with Sections 35.6 and 41 of the 2016 revised IRR of R.A. No. 9184, without thereby incurring any liability to the affected bidder or bidders.
9. Deadline for submission of quotation shall be on **September 12, 2023 at 1:00pm.**
10. Award shall be made on : Per Item Basis Lot/ Package Total Quoted
11. Please put check (/) mark if your product/service is compliant with the technical specifications/terms and

Your Quotation Must be Sealed

**ABC: Two Hundred Seventy Five Thousand
Pesos Only(P275,000.00)**

Item no.	QTY	Unit	Article Description	Pls. Check Here	Unit Cost	Total
1	5	unit	Document Scanner			
			Specifications Scanner:			
			Scanner Type: Sheet-fed			
			Image Sensor: CCD (Charge Coupled Device) or CIS (Contact Image Sensor)			
			Optical Resolution: at least 600 dpi			
			Color Bit Depth: at least 24-bit			
			Grayscale Bit Depth: at least 8-bit			
			Scanning Speed: 35 or more ppm			
			Other features: ADF output, Duplex Color Scan			
			Automatic Document Feeder:			
			Capacity: 30 or more sheets			
			Document Sizes:			
			Paper size Minimum: 2" x 2"			
			Paper size Maximum: 8.5" x 240"			
			Capable of Folio Size Scan: 8.5" x 13"			
			Paper Weight: 27 – 413 g/m2			
			Connectivity:			
			Minimum System Requirements:			
			Windows® 7, 8/8.1, 10 or higher			
			Standard Connectivity: At least USB 3.0			
			Warranty: at least 3 years warranty			
			xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx			

Printed Name & Signature of Dealer/

ACKNOWLEDGMENT RECEIPT OF
REQUEST FOR QUOTATION (RFQ) NO. 23-09-046

I hereby acknowledge receipt from the **Civil Service Commission (CSC) Caraga Regional Office** of the documents pertaining to the above RFQ:

COMPANY NAME : _____
CONTACT PERSON : _____
ADDRESS : _____
CONTACT NUMBER : _____
E-MAIL ADDRESS : _____

Printed Name & Signature of Dealer/
Authorized Representative

Date

ACKNOWLEDGMENT RECEIPT OF
REQUEST FOR QUOTATION (RFQ) NO. 23-09-046

I hereby acknowledge receipt from the **Civil Service Commission (CSC) Caraga Regional Office** of the documents pertaining to the above RFQ:

COMPANY NAME : _____
CONTACT PERSON : _____
ADDRESS : _____
CONTACT NUMBER : _____
E-MAIL ADDRESS : _____

Printed Name & Signature of Dealer/
Authorized Representative

Date