

Republic of the Philippines  
BIDS AND AWARDS COMMITTEE  
(Goods and Services)  
City Government of Baguio  
Baguio City

Standard Form No.: SF - GOODS-60  
Revised on: September 5, 2016  
Standard Form Title: Request For Quotation

Reference No: 19700  
Solicitation No: 566  
Negotiated Procurement  
Date: August 25, 2020  
OBR #

Sir/Madam:

Please quote your price of items listed below as per specifications, stating the shortest time of delivery. Please submit your quotation duly signed by you or your representative to the Bids and Awards Committee not later than 2:00 PM \_\_\_\_\_ c/o the BAC Secretariat, City General Services Office, City Hall, Baguio City. you may fax your quotations through Telefax No. (074)424-5148.

We may purchase the item/s from your company if the offer is found to be reasonable and advantageous to the City Government of Baguio. But we reserve the right to accept or reject the offer or all quotation found not in order.

Thank you very much.

**NOTE:**

**"PLEASE SEAL YOUR BIDS"**

**ATTY. LETICIA O. CLEMENTE**

BAC Chairperson and City Budget Officer

ITEM NO.	QTY	UNIT	DESCRIPTIONS	TOTAL ABC	BID PRICE /UNIT	TOTAL BID PRICE
1	1	LOT	Additional JS c/o DRRM	469,800.00		
	4	pax	-- Additional Janitorial Services for Sto. Nino Hospital: Hiring of Janitors for the Operation of Sto. Nino Hospital from August to December 2020 (5 months), Renewable. Shift:2 shifts at 10 hours, 6 days a week, 7 AM - 12 NN, 1PM - 6 PM. Note:Janitorial supplies and equipment shall be provided by the agency.	117450.00		

PURPOSE: For additional janitorial services at BCCIU-Sto. Nino Hospital Operation which serves as COVID-19 quarantine facility.

NOTED:

- 1) Delivery Period within calendar days
- 2) price Validity shall be for a period of \_\_\_\_\_ calendar days
- 3) Warranty (for equipments) \_\_\_\_\_ Minimum of 1 year
- 4) Bid Price should be inclusive of VAT and delivery charges
- 5) Please indicate the brand of your offer. For machines/equipment, please attach brochure.
- 6) Unit prices must not exceed indicated line item price.

\_\_\_\_\_  
Name of Establishment

\_\_\_\_\_  
Philgeps Registry No.

\_\_\_\_\_  
Printed Name and Signature of Bidder

\_\_\_\_\_  
Address and Contact Number

\_\_\_\_\_  
TIN