

## REQUEST FOR QUOTATION

The Cagayan Economic Zone Authority (CEZA), will undertake a Shopping for the “Supply and Delivery of Antigen Test Kits and Gloves”, in accordance with Section 52.1 (b) of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184, otherwise known as the Government Reform Act (Updated as of 15 January 2024).

<b>Name of Project</b>	Supply and Delivery of Antigen Test Kits and Gloves
<b>Approved Budget for the Contract</b>	Two Hundred Fifty-Four Thousand Pesos (₱254,000.00)
<b>Specifications</b>	See attached Technical Specifications (Annex B)
<b>Location</b>	CEZA Office, Mandaluyong City
<b>Delivery Term</b>	Three (3) days from the receipt of the Purchase Order

Interested suppliers are required to submit their valid and current Mayor’s/Business Permit, PhilGEPS Registration Number, price quotation form (Annex A), and Technical Specification compliance (Annex B) during the submission of the offer/quotation.

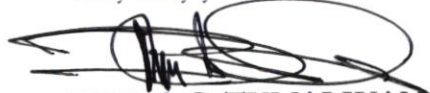
Award of the contract shall be made to the lowest quotation, which complies with the minimum description as stated above and other terms and conditions stated in the price quotation form.

Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by the bidder or his/her duly authorized representative/s.

Submission of quotation and eligibility documents is on or before 10:00 A.M. of March 11, 2024, at the Cagayan Economic Zone Authority, 10<sup>th</sup> Floor Greenfield Tower, Mayflower cor. Williams Sts., Greenfield District, Highway Hills, Mandaluyong City, Metro Manila. Open submission may be submitted, manually or by email @ [bacsecretariat@ceza.gov.ph](mailto:bacsecretariat@ceza.gov.ph).

For inquiries, you may contact us at Tel. No. 8291-6704 to 8 and email [bacsecretariat@ceza.gov.ph](mailto:bacsecretariat@ceza.gov.ph).

Very truly yours,



**PERLA C. TUMALIUAN**  
BAC Chairperson

# ANNEX A REQUEST FOR QUOTATION

**TO: CAGAYAN ECONOMIC ZONE AUTHORITY**  
 10/F GREENFIELD TOWER, MAYFLOWER COR  
 WILLIAMS STREETS, GREENFIELD DISTRICT  
 MANDALUYONG CITY, METRO MANILA,  
 PHILIPPINES 1550  
 ☎ (+6328) 291 6704 to 08

PR No: 2024-03-225

PR Date: MARCH 5, 2023

Please quote your best prices on the items below under the stated terms and conditions. If the total amount is P80,000 or more, submit a bidder's bond in cash, manager's or cashier's check equivalent to 5% thereof.

We offer to perform the work or supply these items at the quoted prices and under the terms stated below. We certify that our company is a manufacturer, licensed distributor or dealer of these items and that at least 60% of the capital thereof is owned by Filipinos, proof of which may be submitted.

- a. Prices shall be valid until \_\_\_\_\_
- b. Delivery shall be completed within \_\_\_\_\_ days from receipt of Job or Purchase Order
- c. Payment within seven days after delivery, acceptance and compliance with payment requirements
- d. We shall pay a penalty at 1/10th of 1% of the value of the undelivered balance for each day of delay in delivery or completion of work.

**PHILIP EARL H. ACHANZAR**  
 Supervising Administrative Officer

ITEM NO.	QTY.	UNIT	DESCRIPTION	UNIT PRICE	AMOUNT
	<b>1 LOT OF ANTIGEN TEST KITS AND GLOVES</b>				
I.	4,200	Piece	<b>ANTIGEN TEST KITS</b> <ul style="list-style-type: none"> <li>• 87% Sensitivity</li> <li>• 99% Specificity</li> <li>• DOH Approved</li> <li>• 1 Year Shelf Life</li> </ul>		
	10	Box	<b>GLOVES</b> <ul style="list-style-type: none"> <li>• Small Size</li> </ul>		
			-nothing follows-		
			<b>Note: Cost must be VAT-inclusive</b>	<b>TOTAL:</b>	

ENCLOSE THIS FORM IN A SEALED ENVELOPE WITH THE RFQ NUMBER WRITTEN ON THE OUTSIDE AND SUBMIT NOT LATER THAN

DATE MARCH 11, 2024	TIME 10:00 AM
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WHEN YOU OR YOUR REPRESENTATIVE IS REQUESTED TO ATTEND THE OPENING OF ALL QUOTATIONS. THE AUTHORITY RESERVES THE RIGHT TO ACCEPT OR REJECT ANY OR ALL QUOTATIONS AND TO IMPOSE ADDITIONAL TERMS AND CONDITIONS IT MAY DEEM NECESSARY.

TOTAL QUOTATION AMOUNT
PREPARED BY:
SIGNATURE
NAME
POSITION

BUSINESS NAME / BUSINESS ADDRESS:

PHONE NO. / FAX NO.

TIN: \_\_\_\_\_

## ***TECHNICAL SPECIFICATIONS***

Bidders/Suppliers must state “*Comply*” in the column “*Statement of “Compliance”*” against each of the individual parameters of each “*Specification*”. Please do not just place a check in the bidder’s “*Statement of Compliance*”.

Item	Technical Specifications			STATEMENT OF COMPLIANCE
	<b>1 LOT OF ANTIGEN TEST KITS AND GLOVES</b>			
I.	4,200	Piece	<b>ANTIGEN TEST KITS</b> <ul style="list-style-type: none"> <li>• 87% Sensitivity</li> <li>• 99% Specificity</li> <li>• DOH Approved</li> <li>• 1 Year Shelf Life</li> </ul>	
	10	Box	<b>GLOVES</b> <ul style="list-style-type: none"> <li>• Small Size</li> </ul>	