

## PROVINCE OF BENGUET La Trinidad BIDS AND AWARDS COMMITEE (INFRASTRUCTURE PROJECTS)

Project Number	GF 20054			October 14, 2020	
			_	Date	
MEMORANDUM TO:					
Mr. / Ms.:	BAC SUPPORT STAFF (Canvasser)				
	n each of the following dealer/	establishment a copy  D VAWC REFUGEE	of the solicitation "bid"	tender for the project	
for use of KAE	MAYAN to be opened on	October 20, 2020	TENT OF THE PERSON IN	ABC: 1,000,000	0.00
				-	
	STRUCTION FIRM	ADDRESS	RECEIVE	ED DATE	
1			7120210	DATE	_
3					
4					
5					
6					
7					
8					
9					
10					
				NY G. SACLA A Chairperson	
		CERTIFICATION			
I/We the u ments a copy of the the time of opening of	indersigned, hereby jointly and solicitation bid papers and that of the same.	severally certify to hat tonly those indicated	ave given each of the a above shall submit the	bove contractor/establi ir quotations before	ish-
CANVASS	SER/S:				
	Signa	ture over printed nam	ne/s		



## Republic of the Philippines PROVINCE OF BENGUET La Trinidad

## Local Disaster Risk and Reduction Management Office

	Proje	ct Number	r:	GF 20054		Sourc	e of Fund:	GENERAL FUND	2020
		CONSTRUCTION OF CICL AND VAWC REFUGI DUACAN, KABAYAN	GE CENTER,	No. of	Calendar Days:	70	)		
Location of the Project:KAI		KABAYAN							
In p which Plea not la	ase quater tha	nce to RA sinder Small ote your lo n 8:30 am k you very ONS: "PLEAS 1. All En 2. To qui	ewest pricular pricul		t your Quotation of C Office, Capitol I	(BAC), invites duly assigned b La Trinidad.	ATTY. S BAC- Inititizen or 75%	UNNY SACLA a Chairperson	
		of revise 4. Docum  5. The or	d R.A. 91 d R.A. 91 a) Deta b) Mayo c) Philo d) PCAl e) Lates f) Omni g) Provi *in lieu a Special er agent v	elative to the Evaluation of qoutation, Post-Q 84 and its implementing rules and regulation equirements to be submitted with this RFQ: led Estimates; r's/Business Permit; EPS Registration Number; B License; tincome/Business Tax Returns for ABC abous Sworn Statement for ABC above P50,00 ncial Permit of 'b' and 'c', certified true copy of PhilGEPS ized person to secure and drop quotations (FPower of Attorney (SPA), particularly stating ith the power to secure, drop and sign in better the power to secure, drop and sign in better the secure is the secure of th	ualification and ass.  (Kindove P500,000.00; 0.00; and  Platinum membe	ward of contraction ward of contraction was in the contraction was the projection was a second to the projection was a secon	et shall be gov	If/herself or his/he	
		6. Detaile 7. Detaile 8. To sub 9. All Era	ed estima ed Estima omit the fo a) Cons b) Cash c) Manp sures sha	te for Construction Health and Safety Require tes for reinforcing steel bars shall be itemized illowing additional documentary requirements truction Schedule and S-Curve; d) Equ Flow; e) Con	d according to its within three (3) of ipment Utilization struction Method; struction Safety and	size. days from Notio Schedule; ; and ndHealth Progi	ce of the BAC		
	NO.			PROJECT TITLE	QUA	ANTITY	UNIT	UNIT PRICE	TOTAL PRICE
BID A	1	SCOPE ( Spl. A Spl. B ITEM II ITEM III ITEM IV ITEM VI ITEM VII ITEM VIII ITEM VIII ITEM IX ITEM X  1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DF WORI Project I Construi Structuri Formwoi Concrete Steel We Masonry Carpenti Installati Steel We Tinnery Electrica MI Cargo Ti Welding One Bag Formwor Electric I Portable	Billboard  Stion Health and Safety Requirements Excavation - CE ks Works KS Works Orks (RSB) And Plastering Works More of Doors and Windows Orks (welding)  Works WIMUM EQUIPMENT REQUIRED  UCK Machine Ger Concrete Mixer ks, Forms and Braces Rebar Cutter (Heavy Duty) Concrete Mixer	w w 1. w 1. 3,6 w w w w	whole whole 3.39 whole 6.77 i01.05 whole	whole whole cu.m. whole cu.m kgs whole whole whole whole whole whole		
		NT IN W						***************************************	
in distri	This is buting nes in s	to certify th and/or coll securing pr	nat I have lecting th	TIFICATION  full knowledge, authority and responsibility Request for Quotation in accordance to the Bids and Awards Committee on	I/We q	uote you on th	e project note	cepted your generated above.	
BAC SUPPORT STAFF PRINTED NAME & SIGNATURE OF AUTHORIZED CANVASSER					Name of Owner (Signature over printed name)				
					Telephone / Cellphone Number e-mail Address				

Date: