



SUBIC BAY METROPOLITAN AUTHORITY PROCUREMENT AND PROPERTY MANAGEMENT DEPARTMENT

Room 201 Bldg. 255, Barryman Road, Subic Bay Freeport Zone, Philippines
 Tel. Nos. (047) 252-4503/4124/4211/4283/4230/4214/4424/4282 Fax. No. (047) 252-4284/4251

QUOTATION FORM

You may send your quotation via email to sbmappmd@gmail.com
 email with "cc/bcc" WILL NOT BE ACCEPTED.

Approved Budget for the Contract: _____

For inquiries, contact: _____ at Tel. No. (047) 252-

REFERENCE: 0 0 0 5 1 - 2 0 - 1 0 1 6 - 0 0 0 6

<p>This is a "REQUEST FOR QUOTATION" for items listed below. Pls submit your quotation not later than _____.</p> <p>Please note that quotation submitted beyond the deadline given above, may not be considered.</p>	<p>TERMS:</p> <ul style="list-style-type: none"> * Payment: _____ days * Delivery: _____ calendar days 						
<p>* <input type="checkbox"/> NON-VAT <input type="checkbox"/> VAT REGISTERED</p> <p style="padding-left: 100px;"><input type="checkbox"/> Vat Inclusive <input type="checkbox"/> Vat Exclusive</p> <p>TIN #: _____</p>	<p style="text-align: center;">DELIVERY POINT: PPMD RECEIVING SECTION Bldg 709, Burgos Street, Subic Bay Freeport Zone</p> <p>REMINDER: If FOB destination or others, please indicate the estimated freight cost.</p>						
ITEM NO		ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE

1	DUPLXER	1	EA *	_____			
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SPECIFICATIONS:
 OPERATING FREQUENCY: 806-869 MHZ
 INSERTION LOSS: 1DB MAX
 FREQUENCY PASS BAND:
 RX: 806-824 MHZ TX: 851-869 MHZ
 TX NOISE SUPPRESSION: 80 DB MIN
 RX ISOLATION: 80 DB MIN
 FREQUENCY SEPARATION: 45 MHZ
 RETURN LOSS: 14 DB MIN
 MAXIMUM INPUT POWER: 500 W
 TEMPERATURE RANGE: -30 C TO +60 C
 RACK MOUNTABLE
 TERMINATIONS: N-TYPE
 INPUT AND OUTPUT IMPEDANCE: 50 OHMS

<p>* COMPANY NAME: _____</p> <p>* MAILING ADDRESS: _____</p> <p>* TEL NO.: _____ FAX NO.: _____ E-MAIL ADD: _____</p>	<p>* GRAND TOTAL: _____</p>	
<p>CERTIFICATION:</p> <p>* I hereby certify that I have personally quoted the price/s of the item/s mentioned above, and further attest that the validity is 30 working days upon signing, unless otherwise stated herein:</p> <p>_____ * Signature over printed name Date Designation (Authorized Company Personnel)</p>	<p>CERTIFICATION:</p> <p>I hereby certify that I have personally canvassed/verified the price/s of the item/s mentioned above.</p> <p>_____ Signature over printed name Date (Canvasser)</p>	<p>Opened by: _____</p> <p>Witnesses: _____</p> <p>_____ _____</p> <p>Date: _____</p>

IMPORTANT NOTICE TO SUPPLIER/CONTRACTOR:

Please answer all required data marked with *.

Under RA 7227, SBMA is exempted from VAT.

ITEM NO	ITEM DESCRIPTION	QTY	UI	BRAND / WARRANTY	UNIT PRICE	TOTAL PRICE
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NOTE TO SUPPLIERS:

Supplier/s may submit their quotation/s thru:

*PERSONAL

*COURIER

*FACSIMILE (acceptable for PR with ABC of less than P50,000)

*EMAIL DIRECTLY to sbmappmd@gmail.com. (Emails with "cc" or "bcc" will NOT BE ACCEPTED; Quotation/s sent to any other email address will also NOT be considered)

*Suppliers may observe the opening of bids/quotations; kindly confirm schedule with the Technical Section at (047) 252-4503.

*For Services/Services & Materials with contract price of P500,000.00 and above, Performance Security is required.

*For Services & Materials/Equipment with contract price of P300,000.00 and above, Warranty Security is required EXCEPT for those deliveries that are outrightly consumed within the date of delivery/rendering of services.

* COMPANY NAME: _____ * MAILING ADDRESS: _____ * TEL NO.: _____ FAX NO.: _____ E-MAIL ADD: _____			* GRAND TOTAL: _____
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