



OFFICE OF THE VICE-CHANCELLOR FOR ADMINISTRATION

7 September, 2017

NOTICE TO THE PUBLIC
SPMO-ALT-17-09-710

The **National Institute of Physics**, University of the Philippines, Diliman (UPD) hereby informs the public that it will be procuring the following item/s through **Shopping/Small Value Procurement**:

Item No.	Qty.	Item(s)	Technical Specifications	Approved Budget
1	1 lot	Laboratory Supplies (Chloride Ion Selective Electrode, etc.)	Please see attached document	Php102,352.32

Submit your quotation duly signed by you or your duly authorized representative with the following eligibility requirements on a sealed envelope:

I. Certified Photocopies of:

- a. Valid Business/Mayor's Permit;
- b. Latest Annual Income Tax Return
- c. PhilGEPS Registration Number;
- d. Valid Tax Clearance (*per Executive Order 398, Series of 2005, as finally reviewed and approved by the BIR*)

II. Original Copy of:

- e. Notarized Omnibus Sworn Statement

Quotation and eligibility requirements must be delivered to the address below on or before the specified closing date and time.

Supply and Property Management Office (SPMO)
Lakandula Street, at the back of Albert Hall
UP Diliman, Quezon City

Thank you.

(SGD) VIRGINIA C. YAP

Vice-Chancellor for Administration &
Concurrent Chair, Bids & Awards Committee



OFFICE OF THE VICE-CHANCELLOR FOR ADMINISTRATION

TERMS AND CONDITIONS

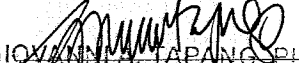
1. Bidders must provide accurate and correct information required in the technical specifications.
2. Price quotation/s must be valid for a period of one hundred twenty (120) calendar days from the date of submission.
3. Price quotation/s, to be denominated in Philippine peso shall include taxes, duties and/or levies payable.
4. Quotations exceeding the Approved Budget for the Contract (ABC) shall be rejected. Multiple offers/alternate offer shall also be rejected.
5. Award of contract shall be made to the lowest complying and responsive offer (for goods) or, the highest rated offer (for services) which complies with the minimum technical specifications and other terms and conditions.
6. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialled by you or your duly authorized representative.
7. The requisitioner shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
8. Liquidated damages equivalent to one tenth of one percent of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The University of the Philippines will rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other course of action and remedies open to it.
9. The University of the Philippines-Diliman reserves the right to accept or reject any bid, to annul the bidding process, and to reject all bids at any time prior to contract award, without thereby incurring any liability to the affected bidder or bidders.

BID FORM (TECHNICAL SPECIFICATIONS)

National Institute of Physics

REQUIRED SPECIFICATIONS	OFFERED SPECIFICATIONS	REFERENCES (include supporting documents)	COMMENTS/REMARKS (clarify inclusion/ exclusion)	EVALUATION
One (1) lot Laboratory Supplies				
2 pcs. Chloride Ion Selective Electrode				
Range: 10 to 20,000 ppm				
Accuracy: $\pm 10\%$ of full scale (when calibrated from 10 to 1000 mg/L)				
Compatibility: must be compatible with Vernier Labquest 2				
Inclusion: with an ISE chloride high and low standard solutions				
2 pcs. Nitrate Ion Selective Electrode				
Range: 10 to 10,000 ppm				
Accuracy: $\pm 10\%$ of full scale (when calibrated from 10 to 100 mg/L)				
Compatibility: must be compatible with Vernier Labquest 2				
Inclusion: with an ISE nitrate high and low standard solutions				
Delivery: 60 calendar days upon receipt of PO				
Warranty: 1 year technical support & parts (consumables not included).				

Note: Pls. fill-up all applicable columns.


 GIOVANNI M. TAPANG, PH.D.
 Project Leader - STAMP

 Technical Evaluator

Signature of Representative _____
 Name of Representative _____
 Position _____
 Company _____
 Address _____
 Telephone/Fax/E-mail _____