



BASES CONVERSION and DEVELOPMENT AUTHORITY

2/F Bonifacio Technology Center, 31st Street Bonifacio Global City, Taguig City

Tel. No. 8575-1700 loc. 1782/1784

Fax No. : 8575-1785

Email: samateo@bcda.gov.ph

REQUEST FOR QUOTATION

(Company Name):

Date: 13 September 2024

PR #: PR0000835

Please quote your lowest price(s) using this form, or your letterhead. Also, take note of the following details:

- 1) Quotation/s shall be addressed to the Head of Procurement Division. Please indicate Solicitation or Reference No.
- 2) Send the said quotation/s to BCDA or fax the same at no. 8575-1785 not later than **19 September 2024**
- 3) Quotation/s submitted after the set deadline indicated in item no. 2 shall not be accepted/considered.
- 4) The quotation/proposal shall be properly signed by the authorized representative and/or immediate supervisor.

BCDA reserves the right to accept or reject any or all of the quotations, or waive formally therein, or to accept quotation/s as may be considered most advantageous to the gov't., or to pursue appropriate legal action should the winning bidder refuse to accept the award without justifiable reason/s.

STEFANIA MATEO
Canvasser

ALMIRA S. CLARIANES
Chief Administrative Officer

TO: BCDA HEAD OF PROCUREMENT

Per request, below is/are the price(s) of the article(s)/service(s) as indicated under Unit Price:

QTY (A)	UNIT	DESCRIPTION/SPECIFICATIONS	UNIT COST (ex-VAT) (B)	VAT (C)	TOTAL UNIT COST (D = B + C)	TOTAL AMOUNT (A x D)
1	LOT	<p>MENTAL HEALTH SERVICE PROVIDER</p> <p>For BCDA CY 2024-2025 Details: (See Attached Terms of Reference)</p> <p>4. The mental health service provider shall undertake the following services:</p> <p>a. Easy access to twenty-five (25) online counseling sessions</p> <ul style="list-style-type: none"> i. with a licensed psychologist or counselor ii. maintain strict standards of confidentiality iii. no hidden charges if pharmacological intervention is required iv. the unused sessions may be converted to a webinar or other services <p>b. At least two (2) leadership training programs or mental health workshops</p> <ul style="list-style-type: none"> i. a hybrid or face-to-face set-up ii. at least (8) hoursworkshopp/training session iii. can accommodate 30 participants iv. course outline focused on <ul style="list-style-type: none"> 1. preventing and overcoming stress and burnout 2. building empathy in leadership <p>c. A corporate-wide online mental health assessment and analytics survey</p> <ul style="list-style-type: none"> i. can measure employees' mental health indicators and key HR metrics such as job satisfaction, engagement, net promoter score and intention to stay ii. provide detailed analysis, assessment and summary report by age, sex, job level, department, and tenure iii. furnish employees with the individual mental health scores iv. present the summary report and provide recommendations to management <p>e. Four (4) webinars</p> <ul style="list-style-type: none"> i. at least one (1) hour long ii. no limit to the number of participants iii. focused on increasing mental health awareness and improving employee mental well-being (e.g. stress management, self-care strategies, workplace dynamics, personal growth and development, etc.) <p>f. Educational email campaigns</p> <p>g. A dedicated account manager</p> <p>5. The service provider shall submit their company profile with their roster of clients, a sample mental health assessment report, and webinar topics list.</p> <p>6. The coverage shall be for the period of one (1) year upon the signing of the contract, unless otherwise terminated pursuant to the grounds for termination of contracts in accordance with the Guidelines on Termination of Contracts issued by the Government Procurement Policy Board (GPPB Resolution No. 018-2004 dated December 2004).</p> <p>7. The mental health provider/company should have the following minimum qualifications:</p> <ul style="list-style-type: none"> a. With at least one (1) year of existence as a mental health provider; b. Must be duly registered with the Securities and Exchange Commission (SEC); c. Must be duly registered with PhilGEPS. <p>8. All price quotations/premiums for all covered employees should not exceed Four Hundred Fifty Thousand Pesos (P450,000.00) for 500 employees, inclusive of all applicable taxes and other charges.</p> <p>9. Terms of Payment based on the total amount of the contract are as follows:</p> <ul style="list-style-type: none"> • 35% after the completion of one (1) mental health training • 35% after the conduct of two (2) webinars • 30% upon delivery of final service <p>10. The proponent is required to submit to BCDA the following documentary requirements:</p> <ul style="list-style-type: none"> a. PhilGEPS registration number; b. Mayor's/Business Permit (updated); c. Income/Business Tax Return and/or Tax Clearance; and d. Omnibus Sworn Statement 				
TOTAL AMOUNT						₱



BASES CONVERSION and DEVELOPMENT AUTHORITY

2/F Bonifacio Technology Center, 31st Street Bonifacio Global City, Taguig City

Tel. No. 8575-1700 loc. 1782/1784

Fax No. : 8575-1785

Email: samateo@bcda.gov.ph

REQUEST FOR QUOTATION

(Company Name):

Date: 13 September 2024

PR #: PR0000835

Please quote your lowest price(s) using this form, or your letterhead. Also, take note of the following details:

- 1) Quotation/s shall be addressed to the Head of Procurement Division. Please indicate Solicitation or Reference No.
- 2) Send the said quotation/s to BCDA or fax the same at no. 8575-1785 not later than **19 September 2024**
- 3) Quotation/s submitted after the set deadline indicated in item no. 2 shall not be accepted/considered.
- 4) The quotation/proposal shall be properly signed by the authorized representative and/or immediate supervisor.

BCDA reserves the right to accept or reject any or all of the quotations, or waive formally therein, or to accept quotation/s as may be considered most advantageous to the gov't., or to pursue appropriate legal action should the winning bidder refuse to accept the award without justifiable reason/s.

STEFANIA MATEO
Canvasser

ALMIRA S. CLARIANES
Chief Administrative Officer

TO: BCDA HEAD OF PROCUREMENT						
Per request, below is/are the price(s) of the article(s)/service(s) as indicated under Unit Price:						
QTY (A)	UNIT	DESCRIPTION/SPECIFICATIONS	UNIT COST (ex-VAT) (B)	VAT (C)	TOTAL UNIT COST (D = B + C)	TOTAL AMOUNT (A x D)

Documentary Requirements upon submission of quotation:

- 1) Valid Mayor's/Business Permit
- 2) PhilGEPS Registration No.
- 3) BIR Certificate of Registration (BIR Form 2303)
- 4) Omnibus Sworn Statement and Proof of Authorization

(Upon notification of Notice of Award-winning bidder must submit within 5 working days the duly NOTARIZED OSS and Proof of Authorization e.g., Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable)

Terms and conditions:

Price: Inclusive of all applicable taxes

Payment: NET Thirty (30) working days

Delivery: _____ day/s (upon conforme of P.O.)

Validity of price: one (1) month

WARRANTY: at least one (1) year

We hereby certify, that we have prepared, checked and reviewed this quotation.

This quotation is valid unless revoked in writing which should be done prior to our receipt of the Purchase Order or Job Order.

Printed Name/Signature/DATE

Immediate Supervisor

Telephone / Fax Number