



Contract ID : PCHRD – PB – 2020 – 02  
 Contract Name : Procurement of Consultancy Services for the “Implementation of the 2020 PhilHealth Client Awareness and Satisfaction Survey”  
 Contract Location : DOST-PCHRD Office, PCHRD Saliksik Building, Sikap Street, DOST Main Compound, Gen. Santos Ave., Bicutan, Taguig City

**SUPPLEMENTAL / BID BULLETIN NO. 3**

June 25, 2020

**Subject : Modification / Amendment of some provisions in the Bidding Documents**

In connection with the project stated above advertised at the PhilGEPS and PCHRD Website on June 10 2020; this Supplemental / Bid Bulletin No. 3 is issued to modify or amend some provisions in the Bidding Documents. Attached are the **updated Checklist of Requirements with sample forms**:

**1. FUNDING SOURCE**

ORIGINAL PROVISION	AMENDMENT / CHANGE / CLARIFICATION
<p><b>Part I – Eligibility Documents</b>  <b>From:</b></p> <p><b>Section I: Request for Expression of Interest</b></p> <p><b>Item no. 1.</b> The Philippine Council for Health Research and Development (PCHRD), through the <b>2019 AHEAD (Trust Fund)</b> intends to apply the sum of Five Million Pesos (PhP 5,000,000.00) being the Approved Budget for the Contract (ABC) to payments under the contract for PCHRD – PB – 2020 - 02. Bids received in excess of the ABC shall be automatically rejected at the opening of the financial proposals.</p>	<p><b>Part I – Eligibility Documents</b>  <b>To:</b></p> <p><b>Section I: Request for Expression of Interest</b></p> <p><b>Item no. 1.</b> The Philippine Council for Health Research and Development (PCHRD), through the <b>2019 PhilHealth STUDIES (Trust Fund)</b> intends to apply the sum of Five Million Pesos (PhP 5,000,000.00) being the Approved Budget for the Contract (ABC) to payments under the contract for PCHRD – PB – 2020 - 02. Bids received in excess of the ABC shall be automatically rejected at the opening of the financial proposals.</p>
<p><b>Part II – Bidding Documents</b>  <b>From:</b></p> <p><b>Section I: Notice of Eligibility and Short Listing</b></p> <p><b>Item no. 1.</b> The Philippine Council for Health Research and Development (PCHRD)</p>	<p><b>Part II – Bidding Documents</b>  <b>To:</b></p> <p><b>Section I: Notice of Eligibility and Short Listing</b></p> <p><b>Item no. 1.</b> The Philippine Council for Health Research and Development (PCHRD)</p>

<p>(hereinafter called “Procuring Entity”) has received financing (hereinafter called “funds”) from <b>2019 AHEAD – Trust Fund</b> (hereinafter called the “Funding Source”) toward the cost of the Procurement of Consultancy Services for the “Implementation of 2020 PhilHealth Client Awareness and Satisfaction Survey”. The Procuring Entity intends to apply a portion of the funds in the amount of Five Million Pesos (PhP 5,000,000.00) to eligible payments under the contract for Consultancy Services for the “Implementation of 2020 PhilHealth Client Awareness and Satisfaction Survey” for which the Bidding Documents is issued.</p>	<p>(hereinafter called “Procuring Entity”) has received financing (hereinafter called “funds”) from <b>2019 PhilHealth STUDIES (Trust Fund)</b> (hereinafter called the “Funding Source”) toward the cost of the Procurement of Consultancy Services for the “Implementation of 2020 PhilHealth Client Awareness and Satisfaction Survey”. The Procuring Entity intends to apply a portion of the funds in the amount of Five Million Pesos (PhP 5,000,000.00) to eligible payments under the contract for Consultancy Services for the “Implementation of 2020 PhilHealth Client Awareness and Satisfaction Survey” for which the Bidding Documents is issued.</p>
<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Section III: Bid Data Sheet</b></p> <p><b>1.2.</b> The Funding Source is:</p> <p>The Government of the Philippines (GoP) through <b>2019 AHEAD (Trust Fund)</b>.</p> <p>The name of the project is Consultancy Services for the “Implementation of 2020 PhilHealth Client Awareness and Satisfaction Survey”.</p>	<p><b>Part II – Bidding Documents</b> <b>To:</b></p> <p><b>Section III: Bid Data Sheet</b></p> <p><b>1.2.</b> The Funding Source is:</p> <p>The Government of the Philippines (GoP) through <b>2019 PhilHealth STUDIES (Trust Fund)</b>.</p> <p>The name of the project is Consultancy Services for the “Implementation of 2020 PhilHealth Client Awareness and Satisfaction Survey”.</p>
<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Section V: Special Conditions of Contract</b></p> <p><b>1.1(g).</b> The Funding Source is:</p> <p>The Government of the Philippines (GoP) through <b>2019 AHEAD (Trust Fund)</b>.</p>	<p><b>Part II – Bidding Documents</b> <b>To:</b></p> <p><b>Section V: Special Conditions of Contract</b></p> <p><b>1.1(g).</b> The Funding Source is:</p> <p>The Government of the Philippines (GoP) through <b>2019 PhilHealth STUDIES (Trust Fund)</b>.</p>

## 2. SUBMISSION AND OPENING OF BIDS

<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Section III: Bid Data Sheet</b></p> <p><b>18.</b> The address for submission of bids is:</p> <p>DOST-PCHRD BAC Secretariat c/o Supply and Property Section Finance and Administration Division Philippine Council for Health Research and Development PCHRD Saliksik Building, Sikap Street, DOST Main Compound, Gen. Santos Ave., Bicutan, Taguig City.</p> <p>The deadline for submission of bids is:</p> <p>July 06, 2020 (Monday), 10:00 AM</p>	<p><b>Part II – Bidding Documents</b> <b>To:</b></p> <p><b>Section III: Bid Data Sheet</b></p> <p><b>18. Bidders should submit their bids through:</b></p> <ul style="list-style-type: none"><li>• <b>Electronic Copy – Password-protected bids must be emailed to <a href="mailto:cdpangan@pchr.dost.gov.ph">cdpangan@pchr.dost.gov.ph</a> on or before the submission due date. The passwords for accessing the file will be disclosed by the Bidders only during the actual bid opening which may be done in person or face-to-face through videoconferencing, webcasting or similar technology; and</b></li><li>• <b>Hardcopy should be submitted to the address given below on or before the submission due date.</b></li></ul> <p>The address for submission of bids is:</p> <p>DOST-PCHRD BAC Secretariat c/o Supply and Property Section Finance and Administration Division Philippine Council for Health Research and Development PCHRD Saliksik Building, Sikap Street, DOST Main Compound, Gen. Santos Ave., Bicutan, Taguig City.</p> <p>The deadline for submission of bids is:</p> <p>July 06, 2020 (Monday), 10:00 AM</p>
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<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Section III: Bid Data Sheet</b></p> <p>21.2. The place of bid opening is:</p> <p>DOST-PCHRD Office, 2nd Floor, PCHRD Saliksik Building, Sikap Street, DOST Main Compound, Gen. Santos Ave., Bicutan, Taguig City.</p> <p>The date and time for opening of bids is:</p> <p>July 06, 2020 (Monday), 10:00 AM</p>	<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Section III: Bid Data Sheet</b></p> <p><b>21.2. Opening of bids is through videoconferencing, webcasting or similar technology.</b></p> <p><b>Bidders are advised to join the opening of bids via Google Meet / Zoom. The link for the opening of bids will be sent via email to all bidders who submitted their bids on time.</b></p> <p><b>The date and time of opening of bids is:</b></p> <p><b>July 06, 2020 (Monday), 10:00 AM</b></p>
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**3. CHECKLIST OF REQUIREMENTS**

<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Checklist of Technical Proposal Forms:</b></p> <ul style="list-style-type: none"> <li>• <b>Tab No. 12 . . . . .</b></li> </ul>	<p><b>Part II – Bidding Documents</b> <b>To:</b></p> <p><b>Checklist of Technical Proposal Forms:</b></p> <ul style="list-style-type: none"> <li>• <b>Tab No. 12. Supplemental / Bid Bulletin (attach all Supplemental / Bulletin issued for this project)</b></li> </ul>
<p><b>Part II – Bidding Documents</b> <b>From:</b></p> <p><b>Checklist of Financial Proposal Forms:</b></p> <ul style="list-style-type: none"> <li>• <b>Tab No. 5. FPF5 - Reimbursables per Activity (Not Applicable)</b></li> </ul>	<p><b>Part II – Bidding Documents</b> <b>To:</b></p> <p><b>Checklist of Financial Proposal Forms:</b></p> <ul style="list-style-type: none"> <li>• <b>FPF5 - Reimbursables per Activity (Not Applicable) – Not required anymore</b></li> </ul>

This Supplemental / Bid Bulletin shall form an integral part of the said Bidding Documents.

For guidance and information of all concerned.

  
**ROSELLE L. MARTONITO**  
 Chairperson, Bids and Awards Committee

UPDATED  
CHECKLIST OF REQUIREMENTS  
AND  
SAMPLE FORMS

## CHECKLIST OF TECHNICAL PROPOSAL FORMS

**Approved Budget for the Contract: PhP 5,000,000.00, inclusive of all applicable taxes and fees**

<b>BIDDING FORMS</b>		
<b>TECHNICAL PROPOSAL</b>		
<b>Tab No.</b>	<b></b>	<b>Description</b>
1	<b>TPF1</b>	Technical Proposal Submission Form
2	<b>Bid Security</b>	The Consultant shall submit a Bid Securing Declaration <b>(duly signed and notarized)</b> or any form of Bid Security in an amount stated in the Bid Data Sheet.
3	<b>TPF2</b>	Consultant's References with Supporting Documents
4	<b>TPF3</b>	Comments and Suggestions of Consultant on the TOR
5	<b>TPF4</b>	Description of Methodology and Work Plan for Performing the Project
6	<b>TPF5</b>	Team Composition and Task
7	<b>TPF6</b>	Curriculum Vitae (CV) of proposed Professional Staff to be assigned to the Project <b>(duly signed and notarized)</b> . <b>Please attach supporting documents, i.e. valid licenses/professional registrations, certificates of trainings attended, work experiences and other supporting documents relative to credentials of proposed Professional Staff</b>
8	<b>TPF7</b>	Time Schedule for Professional Personnel
9	<b>TPF8</b>	Activity (Work) Schedule
10	Omnibus Sworn Statement <b>(duly signed and notarized)</b>	
11	Secretary's Certificate	
12	Supplemental / Bid Bulletin, <b>if any</b>	

**Note:** PCHRD shall not assume any responsibility regarding erroneous interpretations or conclusions by the Consultant out of the data furnished by PCHRD in relation to this bidding. The Consultant shall take the responsibility to ensure the completeness of its submission after taking the steps to carefully examine all of the Bidding Documents and its amendments.

**Reminder: ALL PAGES TO BE SIGNED BY BIDDER'S REPRESENTATIVE**

## CHECKLIST OF FINANCIAL PROPOSAL FORMS

**Approved Budget for the Contract: PhP 5,000,000.00, inclusive of all applicable taxes and fees**

<b>BIDDING FORMS</b>		
<b>FINANCIAL PROPOSAL</b>		
<b>Tab No.</b>		<b>Description</b>
1	<b>FPF1</b>	Financial Proposal Submission Form
2	<b>FPF2</b>	Summary of Costs
3	<b>FPF3</b>	Breakdown of Price per Activity
4	<b>FPF4</b>	Breakdown of Remuneration per Activity
5	<b>FPF6</b>	Miscellaneous Expenses

**Note:** PCHRD shall not assume any responsibility regarding erroneous interpretations or conclusions by the Consultant out of the data furnished by PCHRD in relation to this bidding. The Consultant shall take the responsibility to ensure the completeness of its submission after taking the steps to carefully examine all of the Bidding Documents and its amendments.

**Reminder: ALL PAGES TO BE SIGNED BY BIDDER'S REPRESENTATIVE**

## TPF 1. TECHNICAL PROPOSAL SUBMISSION FORM

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*[Date]*

*[Name and address of the Procuring Entity]*

Ladies/Gentlemen:

We, the undersigned, offer to provide the consulting services for *[Title of Project]* in accordance with your Bidding Documents dated *[insert date]* and our Bid. We are hereby submitting our Bid, which includes this Technical Proposal, and a Financial Proposal sealed under a separate envelope.

In accordance with **ITB** Clause 21.1, we confirm that the information contained in the eligibility documents submitted earlier together with the Expression of Interest remain correct as of the date of bid submission.

If negotiations are held during the period of bid validity, *i.e.*, before *[insert date]*, we undertake to negotiate on the basis of the proposed staff. Our Bid is binding upon us and subject to the modifications resulting from contract negotiations.

In accordance with **GCC** Clause 51, we acknowledge and accept the Procuring Entity's right to inspect and audit all records relating to our Bid irrespective of whether we enter into a contract with the Procuring Entity as a result of this Bid or not.

We understand you are not bound to accept any Bid received for the selection of a consultant for the Project.

We acknowledge that failure to sign this Technical Proposal Submission Form and the abovementioned Financial Proposal Submission Form shall be a ground for the rejection of our Bid.

We remain,

Yours sincerely,

Authorized Signature:  
Name and Title of Signatory:  
Name of Firm:  
Address:



## TPF 2. CONSULTANT'S REFERENCES

### Relevant Services Carried Out in the Last Five Years That Best Illustrate Qualifications

Using the format below, provide information on each project for which your firm/entity, either individually, as a corporate entity, or as one of the major companies within an association, was legally contracted.

Project Name:		Country:
Location within Country:		Professional Staff Provided by Your Firm/Entity(profiles):
Name of Client:		Nº of Staff:
Address:		Nº of Staff-Months; Duration of Project:
Start Date (Month/Year):	Completion Date (Month/Year):	Approx. Value of Services (in Current US\$):
Name of Associated Consultants, if any:		Nº of Months of Professional Staff Provided by Associated Consultants:
Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed:		
Narrative Description of Project:		
Description of Actual Services Provided by Your Staff:		

Consultant's Name: \_\_\_\_\_

**TPF 3. COMMENTS AND SUGGESTIONS OF CONSULTANT ON THE TERMS OF REFERENCE AND ON DATA, SERVICES, AND FACILITIES TO BE PROVIDED BY THE PROCURING ENTITY**

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On the Terms of Reference:

- 1.
- 2.
- 3.
- 4.
- 5.

On the data, services, and facilities to be provided by the Procuring Entity:

- 1.
- 2.
- 3.
- 4.
- 5.

**TPF 4. DESCRIPTION OF THE METHODOLOGY AND WORK PLAN FOR  
PERFORMING THE PROJECT**

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## TPF 5. TEAM COMPOSITION AND TASK

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<b>1. Technical/Managerial Staff</b>		
Name	Position	Task

<b>2. Support Staff</b>		
Name	Position	Task

3. Where applicable, indicate relationships among the Consultant and any partner and/or subconsultant, the Procuring Entity, the Funding Source and other parties or stakeholders.

[signature over printed name of Authorized Representative]

[Title]

[Name of Firm]

**TPF 6. FORMAT OF CURRICULUM VITAE (CV) FOR PROPOSED PROFESSIONAL STAFF**

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Proposed Position: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

Name of Staff: \_\_\_\_\_

Profession: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Years with Firm/Entity: \_\_\_\_\_ Nationality: \_\_\_\_\_

Membership in Professional Societies: \_\_\_\_\_

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Detailed Tasks Assigned: \_\_\_\_\_

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**Key Qualifications:**

*[Give an outline of staff member's experience and training most pertinent to tasks on project. Describe degree of responsibility held by staff member on relevant previous projects and give dates and locations. Use about half a page.]*

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**Education:**

*[Summarize college/university and other specialized education of staff members, giving names of schools, dates attended, and degrees obtained. Use about one quarter of a page.]*

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**Employment Record:**

*[Starting with present position, list in reverse order every employment held. List all positions held by staff member since graduation, giving dates, names of employing organizations, titles of positions held, and locations of projects. For experience in last ten years, also give types of activities performed and client references, where appropriate. Use about two pages.]*

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**Languages:**

[For each language, indicate proficiency: excellent, good, fair, or poor in speaking, reading, and writing.]

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**Certification:**

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

**Commitment:**

I also commit to work for the Project in accordance with the time schedule as indicated in the contract once the firm is awarded the Project.

\_\_\_\_\_ Date: \_\_\_\_\_  
[Signature of staff member and authorized representative of the firm] Day/Month/Year

Full name of staff member: \_\_\_\_\_

Full name of authorized representative: \_\_\_\_\_

**SUBSCRIBED AND SWORN** to before me this \_\_\_ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_.

Witness my hand and seal this \_\_\_ day of [month] [year].

**NAME OF NOTARY PUBLIC**

**Serial No. of Commission** \_\_\_\_\_

**Notary Public for** \_\_\_\_\_ **until** \_\_\_\_\_

**Roll of Attorneys No.** \_\_\_\_\_

**PTR No.** \_\_, [date issued], [place issued]

**IBP No.** \_\_, [date issued], [place issued]

**Doc. No.** \_\_\_\_\_

**Page No.** \_\_\_\_\_

**Book No.** \_\_\_\_\_

**Series of** \_\_\_\_\_.



## TPF 8. ACTIVITY (WORK) SCHEDULE

### A. Field Investigation and Study Items

	<i>[1st, 2nd, etc. are months from the start of project.]</i>												
	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	
Activity (Work)													
_____													
_____													
_____													
_____													

### B. Completion and Submission of Reports

Reports	Date
1. Inception Report	
2. Interim Progress Report (a) First Status Report (b) Second Status Report	
3. Draft Report	
4. Final Report	



## OMNIBUS SWORN STATEMENT

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REPUBLIC OF THE PHILIPPINES )  
CITY/MUNICIPALITY OF \_\_\_\_\_ ) S.S.

### AFFIDAVIT

I, *[Name of Affiant]*, of legal age, *[Civil Status]*, *[Nationality]*, and residing at *[Address of Affiant]*, after having been duly sworn in accordance with law, do hereby depose and state that:

1. **Select one, delete the other:**

*If a sole proprietorship:* I am the sole proprietor or authorized representative of *[Name of Consultant]* with office address at *[address of Consultant]*;

*If a partnership, corporation, cooperative, or joint venture:* I am the duly authorized and designated representative of *[Name of Consultant]* with office address at *[address of Consultant]*;

2. **Select one, delete the other:**

*If a sole proprietorship:* As the owner and sole proprietor or authorized representative of *[Name of Consultant]*, I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]**[insert “as shown in the attached duly notarized Special Power of Attorney” for authorized representative]*;

*If a partnership, corporation, cooperative, or joint venture:* I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]*, accompanied by the duly notarized Special Power of Attorney, Board/Partnership Resolution, or Secretary’s Certificate, whichever is applicable;

3. *[Name of Consultant]* is not “blacklisted” or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;

4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;

5. *[Name of Consultant]* is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

6. **Select one, delete the rest:**

*If a sole proprietorship:* The owner or sole proprietor is not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a partnership or cooperative:* None of the officers and members of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a corporation or joint venture:* None of the officers, directors, and controlling stockholders of *[Name of Consultant]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. *[Name of Consultant]* complies with existing labor laws and standards; and

8. *[Name of Consultant]* is aware of and has undertaken the following responsibilities as a Bidder:

- a) Carefully examine all of the Bidding Documents;
- b) Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
- c) Made an estimate of the facilities available and needed for the contract to be bid, if any; and
- d) Inquire or secure Supplemental/Bid Bulletin(s) issued for the *[Name of the Project]*.

9. *[Name of Bidder]* did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_ day of \_\_\_, 20\_\_ at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
*[Bidder's Representative/Authorized Signatory]*

**SUBSCRIBED AND SWORN** to before me this \_\_\_ day of *[month]* *[year]* at *[place of execution]*, Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her *[insert type of government identification card used]*, with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_.

Witness my hand and seal this \_\_\_ day of *[month]* *[year]*.

**NAME OF NOTARY PUBLIC**

**Serial No. of Commission** \_\_\_\_\_  
**Notary Public for** \_\_\_\_\_ **until** \_\_\_\_\_  
**Roll of Attorneys No.** \_\_\_\_\_  
**PTR No.** \_\_, *[date issued]*, *[place issued]*  
**IBP No.** \_\_, *[date issued]*, *[place issued]*  
**Doc. No.** \_\_\_\_  
**Page No.** \_\_\_\_  
**Book No.** \_\_\_\_  
**Series of** \_\_\_\_.

(REPUBLIC OF THE PHILIPPINES)  
CITY OF \_\_\_\_\_) S.S.  
x-----x

**PERFORMANCE SECURING DECLARATION**

*Invitation to Bid: [Insert Reference Number indicated in the Bidding Documents]*

To: *[Insert name and address of the Procuring Entity]*

I/We, the undersigned, declare that:

1. I/We understand that, according to your conditions, to guarantee the faithful performance by the supplier/distributor/manufacturer/contractor/consultant of its obligations under the Contract, I/We shall submit a Performance Securing Declaration within a maximum period of ten (10) calendar days from the receipt of the Notice of Award prior to the signing of the contract.
2. I/We accept that: I/We will be automatically disqualified from bidding for any procurement contract with any procurement entity for a period of one (1) year if in case it is my first offense, or two (2) years if I have a prior similar offense upon receipt of your Blacklisting Order if I/We have violated my/our obligations under the Contract.
3. I/We understand that this Performance Securing Declaration shall cease to be valid upon:
  - a. Issuance by the Procuring Entity of the Certificate of Final Acceptance, subject to the following conditions:
    - i. Procuring Entity has no claims filed against the contract awardee;
    - ii. It has no claims for labor and materials filed against the contractor; and
    - iii. Other terms of the contract; or
  - b. Replacement by the winning bidder of the submitted PSD with performance security in any of the prescribed forms under Section 39.2 of the 2016 IRR of RA No. 9184 as required by the end-user.

**IN WITNESS WHEREOF,** I/We have hereunto set my/our hand/s this \_\_\_\_ day of *[month]* *[year]* at *[place of execution]*.

***[Insert NAME OF BIDDER'S AUTHORIZED REPRESENTATIVE]***  
***[Insert signatory's legal capacity]***  
**Affiant**

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of *[month]* *[year]* at *[place of execution]*, Philippines.

*[Select one of the following paragraphs and delete the other]*

Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC).

Affiant/s exhibited to me his/her *[insert type of government identification card used]* with no. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_.

Witness my hand and seal this \_\_\_\_ day of *[month]* *[year]*.

**NAME OF NOTARY PUBLIC**

Serial No. of Commission \_\_\_\_\_

Notary Public for \_\_\_\_\_ until \_\_\_\_\_

Roll of Attorneys No. \_\_\_\_\_

PTR No. \_\_, *[date issued]*, *[place issued]*

IBP No. \_\_, *[date issued]*, *[place issued]*

Doc. No. \_\_\_\_\_

Page No. \_\_\_\_\_

Book No. \_\_\_\_\_

Series of \_\_\_\_\_.

## Bid-Securing Declaration

(REPUBLIC OF THE PHILIPPINES)

CITY OF \_\_\_\_\_ ) S.S.

x-----x

**Invitation to Bid** *[Insert reference number]*

To: *[Insert name and address of the Procuring Entity]*

I/We, the undersigned, declare that:

1. I/We understand that, according to your conditions, bids must be supported by a Bid Security, which may be in the form of a Bid-Securing Declaration.
2. I/We accept that: (a) I/we will be automatically disqualified from bidding for any contract with any procuring entity for a period of two (2) years upon receipt of your Blacklisting Order; and, (b) I/we will pay the applicable fine provided under Section 6 of the Guidelines on the Use of Bid Securing Declaration, within fifteen (15) days from receipt of written demand by the procuring entity for the commission of acts resulting to the enforcement of the bid securing declaration under Sections 23.1(b), 34.2, 40.1 and 69.1, except 69.1 (f), of the IRR of RA 9184; without prejudice to other legal action the government may undertake.
3. I/We understand that this Bid-Securing Declaration shall cease to be valid on the following circumstances:
  - a. Upon expiration of the bid validity period, or any extension thereof pursuant to your request;
  - b. I am/we are declared ineligible or post-disqualified upon receipt of your notice to such effect, and (i) I/we failed to timely file a request for reconsideration or (ii) I/we filed a waiver to avail of said right;
  - c. I am/we are declared as the bidder with the Highest Rated Responsive Bid, and I/we have furnished the performance security and signed the Contract.

**IN WITNESS WHEREOF**, I/We have hereunto set my/our hand/s this \_\_\_\_ day of [month] [year] at [place of execution].

***[Insert NAME OF BIDDER'S AUTHORIZED REPRESENTATIVE]***  
***[Insert signatory's legal capacity]***

Affiant

**SUBSCRIBED AND SWORN** to before me this \_\_ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_.

Witness my hand and seal this \_\_\_\_ day of [month] [year].

**NAME OF NOTARY PUBLIC**

**Serial No. of Commission** \_\_\_\_\_  
**Notary Public for** \_\_\_\_\_ **until** \_\_\_\_\_  
**Roll of Attorneys No.** \_\_\_\_\_  
**PTR No.** \_\_, [date issued], [place issued]  
**IBP No.** \_\_, [date issued], [place issued]  
**Doc. No.** \_\_\_\_  
**Page No.** \_\_\_\_  
**Book No.** \_\_\_\_  
**Series of** \_\_\_\_\_.

## FPF 1. FINANCIAL PROPOSAL SUBMISSION FORM

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*[Date]*

*[Name and address of the Procuring Entity]*

Ladies/Gentlemen:

We, the undersigned, offer to provide the consulting services for *[Title of Project]* in accordance with your Bidding Documents dated *[insert date]* and our Bid (Technical and Financial Proposals). Our attached Financial Proposal is for the sum of *[amount in words and figures]*. This amount is exclusive of the local taxes, which we have estimated at *[amount(s) in words and figures]*.

Our Financial Proposal shall be binding upon us subject to the modifications resulting from Contract negotiations, up to expiration of the bid validity period, *i.e.*, *[Date]*.

In accordance with **GCC** Clause 51, we acknowledge and accept the Procuring Entity's right to inspect and audit all records relating to our Bid irrespective of whether we enter into a contract with the Procuring Entity as a result of this Bid.

We confirm that we have read, understood and accept the contents of the Instructions to Bidders (ITB), the Bid Data Sheet (BDS), General Conditions of Contract (GCC), Special Conditions of Contract (SCC), Terms of Reference (TOR), the provisions relating to the eligibility of Consultant and the applicable guidelines for the procurement rules of the Funding Source, any and all Bid bulletins issued and other attachments and inclusions included in the Bidding Documents sent to us.

We understand you are not bound to accept any Bid you receive.

We remain,

Yours sincerely,  
Authorized Signature:  
Name and Title of Signatory:  
Name of Firm:  
Address:



## FPF 2. SUMMARY OF COSTS

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Costs	Currency(ies) <sup>2</sup>	Amount in Philippine Peso
Subtotal		
Local Taxes		
Total Amount of Financial Proposal		_____

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<sup>2</sup> In cases of contracts involving foreign consultants, indicate the exchange rate used.

**FPF 3. BREAKDOWN OF PRICE PER ACTIVITY**

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Activity No.: _____	Activity No.: _____	Description: _____
Price Component	Currency(ies) <sup>3</sup>	Amount in Philippine Peso
Remuneration		
Reimbursables		
Miscellaneous Expenses		
Subtotal		_____

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<sup>3</sup> In cases of contracts involving foreign consultants, indicate the exchange rate used.

**FPF 4. BREAKDOWN OF REMUNERATION PER ACTIVITY**

Activity No. _____		Name: _____		
Names	Position	Input <sup>4</sup>	Remuneration Currency(ies) Rate	Amount
Regular staff				
Local staff				
Consultants				
Grand Total				_____

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<sup>4</sup> Staff months, days, or hours as appropriate.

**FPF 5. REIMBURSABLES PER ACTIVITY**

Activity No: \_\_\_\_\_

Name: \_\_\_\_\_

No.	Description	Unit	Quantity	Unit Price In	Total Amount In
1.	International flights _____	Trip			
2.	Miscellaneous travel expenses	Trip			
3.	Subsistence allowance	Day			
4.	Local transportation costs <sup>5</sup>				
5.	Office rent/accommodation/ clerical assistance				
	Grand Total				_____

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<sup>5</sup> Local transportation costs are not included if local transportation is being made available by the Entity. Similarly, in the project site, office rent/accommodations/clerical assistance costs are not to be included if being made available by the Entity.

## FPF 6. MISCELLANEOUS EXPENSES

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Activity No. \_\_\_\_\_ Activity Name: \_\_\_\_\_

No.	Description	Unit	Quantity	Unit Price	Total Amount
1.	Communication costs between _____ and _____ (telephone, telegram, telex)				
2.	Drafting, reproduction of reports				
3.	Equipment: vehicles, computers, etc.				
4.	Software				
	Grand Total				_____