

Bids and Awards Committee

Republic of the Philippines

Professional Regulation Commission

P. Paredes St., Sampaloc, Metro Manila

Facsimile: 5310-0037 / email: bac@prc.gov.ph

NAME OF PROJECT: PROCUREMENT OF INTERNET CONNECTION REDUNDANCY FOR PROFESSIONAL REGULATION COMMISSION CENTRAL OFFICE

- a) *This form must be accomplish per project.*
- b) *The statement shall include all information required in the PBDs prescribed by the GPPB.*
- c) *Statement must be supported by evidence.*
- d) *Use another sheet if necessary.*

I. STATEMENT OF ALL ONGOING CONTRACT/S (GOVERNMENT AND PRIVATE) INCLUDING CONTRACTS AWARDED BUT NOT YET STARTED, IF ANY, WHETHER SIMILAR OR NOT SIMILAR IN NATURE AND COMPLEXITY TO THE CONTRACT TO BE BID FROM JANUARY 2020 PRIOR TO THE DATE OF THE SUBMISSION AND OPENING OF BIDS.

| | |
|---|--|
| Name of the Contract | |
| Date of the Contract | |
| Contract Duration; | |
| Owner's name and address | |
| Kinds of Goods/Services | |
| For Statement of Ongoing Contracts- amount of contract and value of outstanding contracts | |
| Date of Delivery | |

Submitted by:

Name of Company/Supplier/Distributor/Manufacturer
Name and Signature of Authorized Representative
Date:



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II. STATEMENT IDENTIFYING THE SINGLE LARGEST COMPLETED CONTRACT (SLCC) SIMILAR TO THE CONTRACT TO BE BID FROM JANUARY 2018 PRIOR TO THE DATE OF SUBMISSION AND OPENING OF BIDS, EQUIVALENT TO AT LEAST 50% OF THE ABC.
For this purpose, similar contracts shall refer to contracts for the Procurement of Internet Connection Redundancy.

| | |
|--|--|
| Name of the Contract | |
| Date of the Contract | |
| Contract Duration | |
| Owner's name and address | |
| Kinds of Goods/Services | |
| For Statement of SLCC – amount of completed contracts, adjusted by the Bidder to current prices using PSA's consumer price index, if necessary for the purpose of meeting the SLCC requirement | |
| Date of Delivery | |
| End user's acceptance or official receipt(s) or sales invoice issued for the contract, if completed, which shall be attached to the statements | |

Submitted by:

Name of Company/Supplier/Distributor/Manufacturer
Name and Signature of Authorized Representative
Date:

