



## Invitation to Bid for Simplified Bidding

SB No. 2024-05-03 2<sup>nd</sup> Bidding

The CASURECO II ELECTRIC COOPERATIVE, INC. (CASURECO II) thru its Bids and Awards Committee (BAC) invites eligible bidders to participate in the simplified bidding (sealed canvass) for goods/items/services as specified below:

PARTICULARS	ESTIMATED BUDGET COST	REFERENCE	
		RV No.	Date
Procurement of Group Accident and Life Insurance for CASURECO II regular employees	1,300,000.00	219445	January 10, 2024
<b>Source of Fund:</b> IGF (2024 Medical Allowance)			

ACTIVITIES	SCHEDULE	VENUE
Advertisement/Publication	Friday, June 07, 2024	NEA Portal, CASURECO II website
Submission of Sealed Quotation	Thursday, June 13, 2024 until 5PM	CASURECO II Main Office
Bid Opening	Friday, June 14, 2024 9:00 AM	CASURECO II Main Office, Conference Room

### Instruction to Eligible Bidders/Suppliers:

1. Submission of sealed quotation shall be made either by courier or hand carried by the supplier or his duly authorized representative with label "RV No. 221253" on or before the stated date addressed to:

CASURECO II Bids and Awards Committee  
BAC Secretariat CASURECO II Electric  
Cooperative, Inc., Del Rosario, Naga City

2. All interested bidder must submit signed quotation with complete details of information on the Terms and Conditions as attached herein:

3. CASURECO II reserves the right to accept or reject any bid, declare failure of bidding, or choose not to award all bids, any time prior to the contract award, without incurring any liability to the affected bidder.

4. For further queries and concern, you can contact us with the following contact details; landline no. 054-205-2900-2002 or you may send an e-mail at [casureco2bac@yahoo.com](mailto:casureco2bac@yahoo.com)

*-signed-*  
**ENGR. MARY FRANCE D. MORALES**  
BAC Chairperson

*-signed-*  
**ENGR. EDGARDO R. PIAMONTE**  
Acting General Manager



# TERMS OF REFERENCE

## PROCUREMENT OF GROUP ACCIDENT AND LIFE INSURANCE FOR CASURECO II REGULAR EMPLOYEES

Prepared by:

### TECHNICAL WORKING GROUP (TWG)

-SIGNED-

**ENGR. WENDYL BORROMELO**  
Chairman

-SIGNED-

**ENGR. RICHARD PRECONCILLO**  
Vice Chairman

-SIGNED-

**ENGR. ALBERTO REVILLA**  
Member

-SIGNED-

**GIL EDDIE SERRANO JR.**  
Member

-SIGNED-

**IVAN CHRISTIAN CARINO**  
Member

Reviewed by:

### PRE-QUALIFICATION BIDS AND AWARDS COMMITTEE (PBAC)

-SIGNED-

**ENGR. MARY FRANCE MORALES**  
Chairman

-SIGNED-

**ENGR. CARMILLE MALENIZA**  
Vice Chairman

-SIGNED-

**ENGR. JOANALYN NAPAY**  
Member

-SIGNED-

**JANET CARDEL**  
Member

-SIGNED-

**DARWIN DAVE BARRAMEDA**  
Member

Approved by:

-SIGNED-

**ENGR. EDGARDO R. PIAMONTE**  
Acting General Manager



### TERMS OF REFERENCE

<b>Name of the Contract</b>	:	Procurement of Group Accident and Life Insurance for CASURECO II regular employees.
<b>Source of Fund</b>	:	IGF (2024 Medical Allowance)
<b>Approved Budget of the Contract (ABC)</b>	:	One Million Three Hundred Thousand Pesos (Php 1,300,000.00)

#### 1. OBJECTIVE

The Camarines Sur II Electric Cooperative, Inc. (CASURECO II) seeks to acquire the services of a Group Accident and Life Insurance Provider by selecting the Lowest Calculated Responsive Bid. CASURECO II, through the Group Accident and Life Insurance Provider, aims to provide protection to employees' well-being and fostering a positive work environment. This can translate to improved employee morale, productivity, and overall company success.

#### 2. SCOPE OF REQUIREMENTS

Description	Qty	Unit	Coverage Period
Procurement of Group Accident and Life Insurance for CASURECO II regular employees.	279	Regular Employees & AGM	One (1) Year May 12, 2024 -May 11, 2025

#### 3. APPROVED BUDGET OF THE CONTRACT (ABC)

The Approved Budget of the Contract (ABC) is **One Million Three Hundred Thousand Pesos (Php 1,300,000.00)** inclusive of taxes and duties.

#### 4. TECHNICAL SPECIFICATION

This specification establishes the physical characteristics and performance requirements of the services. **Bidder is required to state their compliance to the specification with evidence.** Any form of evidence must be included in the Bidder's technical proposal and shall be used in the bid evaluation. **The statement of compliance of the bidder without any evidence shall mean non-responsiveness of its bid**

SPECIFICATION	Statement of Compliance (Compliant/Not Compliant)	Proof of Evidence
1. Amount of Insurance: Php 1,000,000.00 per insured		
2. Coverage:		



Basic Life Insurance	:	Php 1,000,000. 00		
Group total and permanent disability benefit:	:	Php. 1,000,000.00		
Comprehensive Group Accident Benefit	:	<ol style="list-style-type: none"> <li>1. Accident death and disability benefit: Php. 1,000,000. 00</li> <li>2. Medical and surgical expense benefit: Php. 50,000.00</li> <li>3. Group Terminal illness benefit: 50% of insurance coverage</li> <li>4. Group hospital income benefits: Php 1000.00 /day</li> </ol>		

**5. QUALIFICATIONS**

**Eligibility Requirements:**

- DTI Business name registration;
- Mayor's/Business Permit (current and valid);
- Income/Business Tax Return;
- Omnibus Sworn Statement (duly notarized)

**6. OTHER TERMS AND CONDITION**

- 5.1 In the event that there are newly regularized employees, the Insurance Company shall compute a separate SOA for the premiums of the said employees prorated until duration of the original contract.
- 5.2 In the event that a regular employee retires or avail optional retirement, the Insurance Company shall continue the effectivity until the covered period expires.

**7. MODE OF PAYMENT**

- 6.1. Fifty Percent (50%) upon issuance of Notice to Proceed (NTP).
- 6.2. Fifty Percent (50%) upon signing of contract.

**8. COVERED PERIOD**

May 12, 2024 to May 11, 2025

\*may be subject to applicable changes



**TECHNICAL WORKING GROUP**

-SIGNED-

~~IVAN CHRISTIAN T. CARINO~~  
Member

-SIGNED-

GIL EDDIE L. SERRANO JR.  
Member

-SIGNED-

ENGR. ALBERTO J. REVILLA  
Member

-SIGNED-

MS. CAROL BALMEO  
End-User

-SIGNED-

ENGR. RICHARD J. RECONCILLO  
Co-Chairman

-SIGNED-

ENGR. WENDYL P. BORROMEO  
Chairman



Date : \_\_\_\_\_

**Omnibus Sworn Statement**

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 of *[Name of Bidder]* with office address at *[address of Bidder]*;

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

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

*If a sole proprietorship:* As the owner and sole proprietor of *[Name of Bidder]*, I have full power and authority to do, execute and perform any and all acts necessary to represent it in the bidding for **(the above-captioned materials/services)** of the Camarines Sur II Electric Cooperative, Inc. (CASURECO II);

*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 and/or to represent the *[Name of Bidder]* in the bidding for **(the above-captioned materials/services)** of the



Camarines Sur II Electric Cooperative, Inc. (CASURECO II), as shown in the attached *[state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate issued by the corporation or the members of the joint venture)]*;

3. *[Name of Bidder]* 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 Bidder]* 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:* I am 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 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;

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



8. *[Name of Bidder]* 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]*, if any.

IN WITNESS WHEREOF, I have hereunto affixed my signature this \_\_\_\_\_ day of \_\_\_\_\_ (month) \_\_\_\_\_, (year) at the City of \_\_\_\_\_, Philippines.

\_\_\_\_\_  
Affiant

SUBSCRIBED AND SWORN to before me this     (date)     at the City of \_\_\_\_\_, the affiant exhibited to me (any of the following: Passport, Driver's License, TIN & SSS ID with picture) No/s. \_\_\_\_\_ and valid until \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC  
UNTIL \_\_\_\_\_  
PTR. No. \_\_\_\_\_  
TIN \_\_\_\_\_

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series (year)





## CHECKLIST FOR THE PROCUREMENT OF GROUP ACCIDENT AND LIFE INSURANCE FOR CASURECO II REGULAR EMPLOYEES [SB NO. 2024 – 05 – 03]

### SCOPE OF REQUIREMENTS

Description	Qty.	Unit	Coverage Period
Procurement of Group Accident and Life Insurance for CASURECO II Regular Employees	279	Regular employees & AGM	One (1) year May 12, 2024– May 11, 2025
Proposed ABC: Php 1,300,000.00 inclusive of taxes and duties			

### ELIGIBILITY REQUIREMENTS

SPECIFICATION	Statement of Compliance (Compliant/Not Compliant)
DTI Business Name Registration	
Mayor's/Business Permit (current and valid)	
Income/Business Tax Return	
Omnibus Sworn Statement (duly notarized)	
RESULT:	

### TECHNICAL REQUIREMENTS

SPECIFICATION	Statement of Compliance (Compliant/Not Compliant)	Proof of Evidence
<b>1. Amount of Insurance: Php 1,000,000.00 per insured</b>		
<b>2. Coverage:</b>		
Basic Life Insurance : Php 1,000,000. 00		
Group total and permanent disability benefit: : Php. 1,000,000.00		



<p>Comprehensive Group Accident Benefit</p>	<p>:</p>	<ol style="list-style-type: none"> <li>1. Accident death and disability benefit: Php. 1,000,000.00</li> <li>2. Medical and surgical expense benefit: Php. 50,000.00</li> <li>3. Group Terminal illness benefit: 50% of insurance coverage</li> <li>4. Group hospital income benefits: Php 1000.00 /day</li> </ol>		
<p>Other terms and conditions</p>		<p>In the event that there are newly regularized employees, the Insurance Company shall compute a separate SOA for the premiums of said employees prorated until duration of the original contract.</p>		
		<p>In the event that a regular employee retires or avails optional retirement, the Insurance Company shall continue the effectivity until the covered period expires.</p>		
<p><b>RESULT:</b></p>				