



Republic of the Philippines  
Department of Health

## CENTRAL OFFICE BIDS AND AWARDS COMMITTEE

Name of the Procuring Entity: **Department of Health**

Name of the Project: **Procurement of Various DOH Table Braille Calendar 2021**

**SVP No. 2020-073**

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**Name of Company**

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**Address**

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**Telephone Numbers**

Please submit your lowest price quotation on the items listed below duly signed by your representative not later **15 December 2020; 9:00 A.M.** at Ground Floor, Building 6, Department of Health, San Lazaro Compound, Rizal Avenue, Sta. Cruz, Manila:

Item No.	Item Description	Quantity	Unit	Total ABC (PhP)
1	DOH Table Braille Calendar 2021 (8.5"x5.5")	500	Piece (s)	77,280.00
2	DOH Table Braille Calendar 2021 (11.5"x11")	500	Piece (s)	140,000.00
<b>TOTAL</b>				<b>217,280.00</b>

Your quotation is subject to the following General Conditions:

- 1. Price validity shall be for a period of Ninety (90) calendar days.**
- 2. Delivery Period should be fifteen (15) calendar days upon receipt of approved Notice to Proceed (NTP) and approved final proof.**
- 3. DELIVERY SITE:** Health Promotion and Communication Service, Building 18, San Lazaro Compound, Sta. Cruz Manila
- 4. For one-time delivery:** Terms of Payment/billing shall be made for the completed delivery and acceptance upon presentation of signed Invoice Receipt and submission of relevant documents as stipulated in the contract.
- 5. Instructions on inspection and test for acceptance:**  
Upon delivery, the goods shall undergo preliminary inspection by a DOH-assigned team to ascertain the physical condition and acceptability of the finished products.
- 6. Bidders are entitled to one (1) bid only, otherwise, all bids made shall automatically be rejected.**

**7. The prospective bidder shall submit three (3) sets of true copies of the original certified as such by the bidder or his duly authorized signatory each of the following requirements in one envelope:**

- a. Duly accomplished and signed Price Quotation inclusive of all taxes;
- b. Duly accomplished and signed Technical Specifications;

**NOTE:** In case of award, kindly send a soft copy of technical specifications being offered (in “Word & PDF” format) to this e-mail address: **cobacd.secretariat@gmail.com;**

- c. Duly signed Schedule of Requirements;
- d. Mayor’s / Business Permit issued by the city or municipality where the principal place of business of the prospective bidder is located or the equivalent document for Executive Economic zones or are as together with the corresponding copy of the receipt of payment for the said permit;

*In consideration of the limited access to financial institutions, regulatory and other offices, as well as the implementation of government restrictions on transport and travel, acceptability of the recently expired Mayor’s or Business Permit and the Official Receipt as proof that the bidder has applied and paid for the renewal of the permit; Provided that, the current and valid Mayor’s or Business Permit, as renewed, will be submitted by the bidder with the LCRB after the award of contract but before payment (GPPB Circular 09-2020)*

- e. PhilGEPS Registration Number;
- f. Latest Annual Income Tax / Business Tax Return also refers to Value Added Tax or Percentage Tax Return covering the previous six (6) months (per Revenue Regulation 3-2015), if applicable;
- g. Omnibus Sworn Statement (Use the attached form); and
- h. Duly notarized authority of the signatory:
  - 1. Secretary’s Certificate (i.e. corporation; joint venture agreement); or
  - 2. Special Power of Attorney (i.e. sole proprietor, partnership); or
  - 3. In case the signatory is the sole proprietor, copy of the DTI Registration Certificate.

**Acceptability of Unnotarized Omnibus Sworn Statement and Authority of the Signatory subject to compliance therewith after award of contract but before payment, for procurement activities during a State of Calamity, or implementation of community quarantine or similar restrictions declared or being implemented either in the locality of the PE or of the bidder. (GPPB Circular 09-2020)**

The Submission of Quotation is set on **15 December 2020, 9:00 A.M.** at the COBAC Conference Room, G/F Bldg. No. 6, Department of Health, San Lazaro Compound, Sta. Cruz, Manila. Bids received after

the deadline for submission and receipt of bids shall be declared “late” and shall not be accepted by the Procuring Entity.

**NOTE: Bidders may submit their bid proposal to the COBAC-D Secretariat through any of the following options:**

1. In printed copy to be submitted at the *G/F, Bldg. 6, Department of Health, San Lazaro Compound*; or
2. In soft copy via e-mail to **cobacd.secretariat@gmail.com** provided that it complies with the following condition:
  - i. It should be in a clear .PDF/.IMG/.JPG/.TIFF/.GIF/.PNG format, and shall be in password protected Bidding Documents in compressed archive folders *pursuant to GPPB Resolution No. 09-2020 and Section 25.1 of the 2016 IRR of RA 9184*;
  - ii. A generated bid receipt page or email acknowledgement indicating the time of submission must be secured and printed as a reference;
  - iii. The documentary requirements are arranged accordingly based on the Eligibility Checklist using the standard file name indicated therein.
  - iv. *For electronic bid submission, the password for accessing the Bidding Documents 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. (GPPB Resolution No. 09-2020 and Section 29 of the 2016 IRR of RA 9184)*

*The BAC shall open the bid envelopes using a non-discretionary “pass/fail” criterion. In case of electronic bid submission, Bidding Documents not in compressed archive folders and are not password protected, shall be rejected. However, bid envelopes that are not properly sealed and marked or not properly compressed and password-protected, as required in the Request for Quotation, shall be accepted, provided that the bidder or its duly authorized representative shall acknowledge such condition of the bid as submitted. The BAC shall assume no responsibility for the misplacement of the contents of the improperly sealed or marked bid, or improperly compressed or password-protected folder, or for its premature opening. (GPPB Resolution No. 09-2020 and Section 25.9 of the 2016 IRR of RA 9184)*

Further, once the General Community Quarantine is lifted or the Bidder is determined as the Single/Lowest Calculated and Responsive Quotation, whichever comes first, the Bidder shall submit three (3) sets of printed copies of the eligibility documents, certified as such by the bidder or his duly authorized representative.

**Please use the attached Price Quotation, Technical Specifications, Schedule of Requirements, Omnibus Sworn Statement and Authority of the Signatory Forms.**

**SGD**  
**LILIBETH C. DAVID, MD, MPH, MPM, CESO I**  
Undersecretary of Health  
COBAC-D Chairperson

## PRICE QUOTATION

### PROCUREMENT OF VARIOUS DOH TABLE BRAILLE CALENDAR 2021 SVP No. 2020-073

Item No.	Description	Qty.	Unit	Unit Cost (PhP)	Total Cost (PhP)
1	DOH Table Braille Calendar 2021 (8.5"x5.5")	500	Piece (s)		
2	DOH Table Braille Calendar 2021 (11.5"x11")	500	Piece (s)		

- All price offered (unit price and total bid price) must be type or written in indelible ink.
- Price validity shall be for a period of Ninety (90) calendar days.

After having carefully read and accepted your conditions, I / We quote you on the item/s at prices noted above.

\_\_\_\_\_  
Signature over Printed Name  
[date of signing]

In the capacity of  
Duly authorized to sign bid for and on behalf of

:[title or other appropriate designation]  
:[Name of Company]  
:[Complete office address]  
:[Contact No./ Fax No.]  
:[Email Address]

# Technical Specifications

Republic of the Philippines Department of Health			
TECHNICAL SPECIFICATIONS			
Item No.		Quantity	
ABC:			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
		Bidders must state here either "Comply" or "Not Comply" against each of the individual parameters of each Specification stating the corresponding performance parameter of the equipment offered. Statements of "Comply" or "Not Comply" must be supported by evidence in a Bidders Bid and cross-referenced to that evidence. <b><u>Evidence shall be in the form of manufacturer's un-amended sales literature, unconditional statements of specification and compliance issued by the manufacturer, samples, independent test data etc., as appropriate. A statement that is not supported by evidence or is subsequently found to be contradicted by the evidence presented will render the Bid under evaluation liable for rejection.</u></b>	

\_\_\_\_\_  
 Signature over Printed Name  
*[date of signing]*

In the capacity of  
 Duly authorized to sign bid for and on behalf of

*:[title or other appropriate designation]*  
*:[Name of Company]*  
*[Complete office address]*  
*[Telephone No. / Fax No.]*  
*[Email Address:]*

# Technical Specifications

Republic of the Philippines Department of Health			
TECHNICAL SPECIFICATIONS			
Item No. 1:	DOH Table Braille Calendar 2021 (8.5"x5.5")	Quantity	500 pieces
ABC for Item No. 1 : Php 77,280.00			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>I. Detailed Specification</b>  <b>A. Title:</b> DOH Table Braille Calendar 2021  <b>B. Kind:</b> Calendar  <b>C. Size:</b> 8.5" (width) x 5.5" (length)  <b>D. Binding:</b> Double Loop Full Wire at the Top, White  <b>E. Process:</b> 1. Braille. One side printing 2. Number of Leaves: 13 pages including cover 3. Paper Stock: Matte C2S 140# 4. Color: Cover: Full Color (4/4) Inside Pages: 0/4  <b>F. End User Units (EUU) Camera-ready specimen/sample/layout:</b> End-user will provide a soft copy of the cover design and hard copy sample of the Braille Calendar			
<b>II. <u>Instruction before mass production:</u></b>  Sample subject for approval of EUU before mass production.			
<b>III. <u>Replacement of Sample:</u></b>  The supplier shall promptly replace the equivalent quantity of the goods taken as sample without cost to the DOH.			
<b>IV. <u>Upon delivery the following shall be complied:</u></b>  <b>Packaging Instructions:</b>  Primary Packaging: 100 copies per bundle Secondary Packaging: 5 bundles per box			

\_\_\_\_\_  
 Signature over Printed Name  
*[date of signing]*

In the capacity of  
 Duly authorized to sign bid for and on behalf of:

*[title or other appropriate designation]*  
*[Name of Company]*  
*[Complete office address]*  
*[Telephone No/Fax No.]*  
*[Email Address]*

# Technical Specifications

Republic of the Philippines  
Department of Health

## TECHNICAL SPECIFICATIONS

Item No. 2:	DOH Table Braille Calendar 2021 (11.5”x11”)	Quantity	500 pieces
ABC for Item No. 2: Php 140,000.00			
PURCHASER’S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>I. Detailed Specification</b>  A. <b>Title:</b> DOH Table Braille Calendar 2021  B. <b>Kind:</b> Calendar  C. <b>Size:</b> 11.5” (width) x 11” (length)  D. <b>Binding:</b> Double Loop Full Wire at the Top, White  E. <b>Process:</b> 1. Braille. One side printing 2. Number of Leaves: 13 pages including cover 3. Paper Stock: Matte C2S 140# 4. Cover Color: Full Color (4/4) 5. Inside Pages: 0/4  G. <b>End User Units (EUU) Camera-ready specimen/sample/layout:</b> End-user will provide a soft copy of the cover design and hard copy sample of the Braille Calendar			
<b>II. <u>Instruction before mass production:</u></b>  Sample subject for approval of EUU before mass production.			
<b>III. <u>Replacement of Sample:</u></b>  The supplier shall promptly replace the equivalent quantity of the goods taken as sample without cost to the DOH.			
<b>IV. <u>Upon delivery the following shall be complied:</u></b>  <b>Packaging Instructions:</b>  Primary Packaging: 100 copies per bundle Secondary Packaging: 5 bundles per box			

\_\_\_\_\_  
Signature over Printed Name  
[date of signing]

In the capacity of  
Duly authorized to sign bid for and on behalf of:

[title or other appropriate designation]  
[Name of Company]  
[Complete office address]  
[Telephone No/Fax No.]  
[Email Address]

# ***Schedule of Requirements***

The delivery schedule expressed as weeks/months stipulates hereafter a delivery date which is the date of delivery to the project site.

<b>Item No.</b>	<b>Particular</b>	<b>Qty.</b>	<b>Unit</b>	<b>Delivery Site</b>	<b>Delivery Schedule</b>
1	DOH Table Braille Calendar 2021 (8.5"x5.5")	500	Piece (s)	Health Promotion and Communication Service, Building 18, San Lazaro Compound, Sta. Cruz Manila	Fifteen (15) calendar days upon receipt of approved Notice to Proceed (NTP) and approved final proof.
2	DOH Table Braille Calendar 2021 (11.5"x11")				

\_\_\_\_\_  
Signature over Printed Name  
*[date of signing]*

In the capacity of:

Duly authorized to sign bid for and on behalf of:

*[title or other appropriate designation]*

*[Name of Company]*

*[Complete office address]*

*[Contact No./ Fax No]*

*[Email Address]*



**Omnibus Sworn Statement (Revised)**  
*[shall be submitted with the Bid]*

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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 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, or authorized representative of [Name of Bidder], 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], as shown in the attached duly notarized Special Power of Attorney;

*[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], as shown in the attached [state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable)];

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, **by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting;**

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:]* 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 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 responsibilities as a Bidder in compliance with the Philippine Bidding Documents, which includes:
  - a. Carefully examining all of the Bidding Documents;
  - b. Acknowledging all conditions, local or otherwise, affecting the implementation of the Contract;
  - c. Making an estimate of the facilities available and needed for the contract to be bid, if any; and
  - d. Inquiring or securing 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.
10. **In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.**

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

*[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE]*

*[Insert signatory's legal capacity]*  
Affiant

**[Jurat]**

*[Format shall be based on the latest Rules on Notarial Practice]*

**REPUBLIC OF THE PHILIPPINES )**  
**CITY OF \_\_\_\_\_ ) S.S.**  
**X-----X**

**SECRETARY'S CERTIFICATE**

I, \_\_\_\_\_, a duly elected and qualified Corporate Secretary of \_\_\_\_\_, a corporation duly organized and existing under and by virtue of the laws of the Republic of the Philippines, with principal office and place of business at [complete office address], **DO HEREBY CERTIFY**, that:

I am familiar with the facts herein certified and duly authorized to certify the same;

At the Regular/Special meeting of the Board of Directors of the said Corporation duly convened and held on [dd mm yy] at which meeting a quorum was present and acted throughout, the following resolution was unanimously approved, and the same have not been annulled, revoked and amended in any way whatever and are in full force and effect on the date hereof:

**(Resolution No. \_\_\_\_\_)**

**RESOLVED**, that \_\_\_\_\_ be, as it hereby is, authorized to participate in the bidding of the [Name of the Project and reference number] by the **DEPARTMENT OF HEALTH (DOH)**; and that if awarded the project shall enter into a contract with the **DOH**; and in connection therewith hereby appoint \_\_\_\_\_, acting as duly authorized and designated representatives of \_\_\_\_\_, are granted full power and authority to do, execute and perform any and all acts necessary and/or to represent \_\_\_\_\_ in the bidding as fully and effectively as the \_\_\_\_\_ might do if personally present with full power of substitution and revocation and hereby satisfying and confirming all that my said representative shall lawfully do or cause to be done by virtue hereof;

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

\_\_\_\_\_  
[Corporate Secretary]

**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. \_\_\_\_\_ and his/her Community Tax Certificate 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 \_\_\_\_

**REPUBLIC OF THE PHILIPPINES )**  
**CITY OF \_\_\_\_\_ ) S.S.**  
**X-----X**

**SPECIAL POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS** that the undersigned *[name]*, *[title]* of *[name of Company]*, is lawfully authorized to represent and act on behalf of the *[name of company]*, a company registered under the laws of the Republic of the Philippines with its registered office at *[complete office address]*, do hereby **APPOINT, NAME and CONSTITUTE**, *[name]*, *[title]* of *[name of company]* as my true and lawful attorney-in-fact to act for and in my name and stead, to do, execute and perform any and all acts necessary and/or represent in the bidding and perform the following acts:

1. To participate and submit a bid to the **DEPARTMENT OF HEALTH** for the Procurement of *[Name of Project and reference number]*.
2. To make, sign, execute, deliver and receive contracts, agreements and any and all documents pertinent thereto, as may be necessary to carry into effect the foregoing authority and to bind myself with the DOH.

**HEREBY GIVING AND GRANTING** unto my said attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite or necessary or proper to be done in and about the premises as fully to all intents and purposes as I might or could lawfully do if personally present, with power of substitution and revocation, and hereby ratifying and confirming all that my said attorney-in-fact shall lawfully do or cause to done under and by virtue of these presents.

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

\_\_\_\_\_  
*[Principal]*

\_\_\_\_\_  
*[Legal Representative/s]*

Attorney-in-Fact SIGNED IN THE PRESENCE OF

\_\_\_\_\_  
\_\_\_\_\_  
**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. \_\_\_\_\_ and his/her Community Tax Certificate 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]*

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Series of \_\_\_\_

# ELIGIBILITY REQUIREMENTS CHECKLIST

## PROCUREMENT OF VARIOUS DOH TABLE BRAILLE CALENDAR 2021

SVP No. 2020-073

ITEM NO.	REQUIREMENTS
A.	Duly accomplished and signed Price Quotation; inclusive all taxes
B.	Duly accomplished and signed Technical Specifications;
C.	Duly signed Schedule of Requirements;
D.	<p>Mayor's / Business Permit issued by the city or municipality where the principal place of business of the prospective bidder is located or the equivalent document for Executive Economic zones or areas together with the corresponding copy of the receipt of payment for the said permit.</p> <p><b>NOTE:</b> In consideration of the limited access to financial institutions, regulatory and other offices, as well as the implementation of government restrictions on transport and travel, acceptability of the recently expired Mayor's or Business Permit and the Official Receipt as proof that the bidder has applied and paid for the renewal of the permit; Provided that, the current and valid Mayor's or Business Permit, as renewed, will be submitted by the bidder with the LCRB after the award of contract but before payment (GPPB Circular 09-2020)</p>
E.	PhilGEPS Registration Number;
F.	Latest Annual Income Tax / Business Tax Return also refers to Value Added Tax or Percentage Tax Return covering the previous six (6) months;
G.	Omnibus Sworn Statement;
H.	<p>Duly Notarized Authority of the signatory:</p> <ol style="list-style-type: none"><li>1. Secretary's Certificate (i. e. Corporation; Joint Venture); or</li><li>2. Special Power of attorney (i.e. Sole Proprietorship, Partnership); or</li><li>3. In case the signatory is the sole proprietor, copy of DTI Registration Certificate</li></ol>