## **Bid-Securing Declaration**

## To: PHILIPPINE DEPARTMENT OF TOURISM SAN FRANCISCO

I, the undersigned representative of , do declare	declare that
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- 1. I 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 accept that: my company and I will be automatically disqualified from bidding for any contract with the Philippine Department of Tourism and blacklisted in its future Invitation to Bid in case I have committed any of the following actions:
  - (i) Withdrawn my company's Bid during the period of bid validity required in the Bidding Documents; or
  - (ii) Fail or refuse to accept the award and enter into contract or perform any and all acts necessary to the execution of the Contract, in accordance with the Bidding Documents after having been notified of your acceptance of our Bid during the period of bid validity.
  - 3. I 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 declared ineligible or post-disqualified upon receipt of your notice to such effect, and I failed to timely file a request for reconsideration or I filed a waiver to avail of said right;
    - (c) I am declared as the bidder with the Lowest Calculated and Responsive Bid, and I/we have furnished the performance security and signed the Contract.

**IN WITNESS WHEREOF,** I 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], [State]. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity. Affiant/s exhibited to me his/her [insert type of identification card used], with his/her photograph and signature appearing thereon, with no and his/her 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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