



NATIONAL POWER CORPORATION

SUPPLEMENTAL /BID BULLETIN NO. 2
to the Bid Documents for the:

**SUPPLY OF TWO (2) YEARS SECURITY SERVICES FOR MAJOR REPAIR AND
MAINTENANCE DEPARTMENT**

PR NO. HO-OMR23-003/ REF. NO. PB230912-NA

05 SEPTEMBER 2023

All prospective bidders and authorized copyholders of the Bid Documents of the above-mentioned project are hereby informed of the reminder:

All bidders are enjoined to use the Form No. NPCSF-SEC-03 in the bid documents for the Bid Price Computation under Section VII – Schedule of Requirements.

All other terms and conditions shall remain the same.

For the information and guidance of all authorized copyholders of the Bid Documents and prospective bidders.

For the Bids and Awards Committee:

ATTY. MELCHOR P. RIDULME

Vice President, Office of the Legal Counsel and
Chairman, Bids and Awards Committee



NATIONAL POWER CORPORATION
BIR Road cor. Quezon Avenue, Diliman
Quezon City 1100, Philippines
Tel. Nos. (632) 8921-3541 to 80 • Fax No. (632) 8921-2468
Website: www.napocor.gov.ph



Standard Form NPCSF-SEC-03

BID PRICE COMPUTATION
Coverage: OM- MAJOR REPAIR & MAINTENANCE DEPARTMENT

OFFICE/INSTALLATION	W.O. NCR-22	W.O. NCR-22	W.O. NCR-22
REGION/WAGE ORDER	Regular Guard 27	Senior Guard 2	Supervising Guard 1
NUMBER OF GUARDS			
A. Amount Due to Guard			
1. Daily Wage	570.00	570.00	570.00
2. Average Pay Per Month	18,734.00	18,734.00	18,734.00
3. Night Shift Differential Pay	624.47	624.47	624.47
4. 13th Month Pay	1,444.79	1,444.79	1,444.79
5. Five Days Incentive Allowance	237.50	237.50	237.50
6. Uniform Allowance	50.00	50.00	50.00
7. Additional Allowance	0.00	150.00	350.00
8. COLA	0.00	0.00	0.00
Sub-Total	21,090.76	21,240.76	21,440.76
B. Amount Due to Government			
9. SSS Premium	1852.50	1900.00	1900.00
10. Philhealth	346.75	346.75	346.75
11. State Insurance	30.00	30.00	30.00
12. Pag-ibig (R.A. 7742)	100.00	100.00	100.00
Sub-Total	2,329.25	2,376.75	2,376.75
C. Amount Due to Guard & Gov't			
D. Overhead/Profit Margin			
E. Value Added Tax (12% of D)			
F. Gross Monthly Rate			
G. Total Bid Price per Office/Installation (F x 24 mo. X No. of Guards)			

Name of Bidder _____ Authorized Representative (sign over printed name) _____ Designation _____