

PHILIPPINE DEPOSIT INSURANCE CORPORATION

Makati City

BIDDER INFORMATION SHEET

Name of Courier Company
Address
Telephone No.
Name and Position of Authorized Representative

I. TRACK RECORD

1. Date established
2. No. of years in Courier Industry (checkboxes for 3 years, 4-5 years, 6-10 years, more than 10 years)

3. Nature/Type of Valuable Documents Delivered

4. No. of Branches
Metro Manila/NCR
Luzon
Visayas
Mindanao
International Destinations

5. List of Service Areas Covered (Please use separate sheet, if necessary)

5.1 Metro Manila/ NCR

5.2 Luzon

5.2 Visayas

5.3 Mindanao

5.4 International Destinations

5. List of Clients

II. SERVICES

1. With Door-to-door Delivery Service (checkboxes for Yes, No)

2. Number of business days delivery
2.1 Metro Manila & nearby provinces (Reg. 3& 4)
2.2 Other parts of Luzon
2.3 Any part of Visayas & Mindanao
2.4 Outside of the Philippines/International Destinations

4. With proof of delivery/acknowledgment receipt? (checkboxes for Yes, No)

5. With online document tracking system? (checkboxes for Yes, No)
(Please attach description of tracking system)

This is to certify that the above information are true and correct.

Signature over Printed Name of Authorized Representative