

**INVITATION FOR BID**

**ISSUING OFFICE:**

Guam Power Authority-Procurement Office  
 1<sup>st</sup>. Floor, Room 101  
 Gloria B. Nelson Public Service Building  
 688 Route 15  
 Mangilao, Guam 96913

Attn: JOHN M. BENAVENTE, P.E.  
 General Manager  
 c/o JAMIE LYNN C. PANGELINAN  
 Supply Management Administrator

  
 for **JOHN M. BENAVENTE, P.E.** DATE 9/27/2022  
 General Manager

DATE ISSUED: 10/11/2022  
10/18/2022 BID INVITATION NO.: GPA-061-22

BID FOR: Pad Mounted Transformers

SPECIFICATION: See Attached

DESTINATION: Guam Power Authority Dededo Warehouse

REQUIRED DELIVERY DATE: 36 Weeks After Approved Drawings by Guam Power Authority


**INSTRUCTIONS TO BIDDERS:**

INDICATE WHETHER:  INDIVIDUAL  PARTNERSHIP  CORPORATION

INCORPORATED IN: 2007


This bid shall be submitted in duplicate and sealed to the issuing office above no later than (Time) 10:00 A.M.  
 Date: October 26, 2022 and shall be publicly opened. Bid submitted after the time and date specified above shall be rejected. See attached General Terms and Conditions and Sealed Bid Solicitation for details.

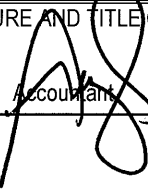
The undersigned offers and agrees to furnish within the time specified, the articles and services at the price stated opposite the respective items listed on the schedule provided, unless otherwise specified by the bidder. In consideration to the expense of the Government in opening, tabulating, and evaluating this and other bids, and other considerations, the undersigned agrees that this bid remain firm and irrevocable within one hundred twenty (120) calendar days from the date opening to supply any or all of the items which prices are quoted.

NAME AND ADDRESS OF BIDDER: <u>Polyphase System Inc.</u> <u>P.O. Box 21146</u> <u>Barrigada, GU 96913</u>	SIGNATURE AND TITLE OF PERSON AUTHORIZED TO SIGN THIS BID:  <u>Accountant</u>
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AWARD: CONTRACT NO.: OP# 31458 AMOUNT: \$53,042.49 DATE: \_\_\_\_\_

ITEM NO(S). AWARDED: Line Item Nos. 1 and 2

CONTRACTING OFFICER:  
  
 for **JOHN M. BENAVENTE, P.E.** DATE 3/13/2023  
 General Manager

NAME AND ADDRESS OF CONTRACTOR: <u>Polyphase System Inc.</u> <u>P.O. Box 21146</u> <u>Barrigada, Guam 96912</u>	SIGNATURE AND TITLE OF PERSON  <u>Accountant</u>
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