

Republic of the Philippines Department of Agriculture

Philippine Center for Postharvest Development and Mechanization

Science City of Muñoz, Nueva Ecija, Philippines

Telephone Nos. 09328696837 (Sun); 09178130852 (Globe) loc. 272/276;

Email add.: philmech.svp2@gmail.com

REQUEST FOR QUOTATION

RFQ No. : <u>C-23-03-08</u> PR No. : <u>23-03-</u>D-07

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than March 13, 2023.

The Philippine Center for Postharvest Development and Mechanization (PHilMech) reserves the right to reject any or all bids/quotations, to refuse to make an award for any item/s due to budget limitation, procurement regulations, or other similar valid causes and to waive any formality not affecting the substance of the bid as the interest of the government may require. It further assumes no responsibility whatsoever to compensate or indemnify suppliers for any expense/s incurred in the preparation of their quotation/s.

RAYMUND JOSEPH P. MACARANAS

	Buyer/Ca			Authorized Official		
NO.	QTY.	UNIT	ITEM AND DESCRIPTION		UNIT PRICE	TOTAL PRICE
			Per Request	Offer/Brand/Model	William Control of the Control of th	
1			Food, Venue and Accommodation for the conduct of CFIDP-SPF Stakeholders Consultation Meeting Workshop on March 20-21, 2023 at Albay			
			March 20, 2023			
	36	pax	Lunch			
	36	pax	PM Snacks			
	21	pax	Dinner			
	21	pax	Accommodation			
			March 21, 2023			
	36	pax	Breakfast			
	36	pax	AM Snacks			
	36	pax	Lunch			
	36	pax	PM Snacks			
	15	pax	Dinner			
	15	pax	Accommodation			
			*Meals: 3 main courses (seafoods, pork/beef/chicken & vegetables) + dessert + soup + drinks *With free flowing coffee *Comply/Provide health protocols implemented by Provincial IATF *Accommodation: 2 pax per airconditioned room			
			*airconditioned training hall with sound system, projector and mic			

Delivery Period unit	ŧ
Price validity	:
Warranty	:
Terms of Payment	:



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General Conditions

- 1. The Approved Budget for the Contract (ABC) is 97,200.00
- 2. Specifications herein provided are the minimum requirements of the PHilMech. Hence a supplier must not offer lower specifications than required.
- 3. Supplemental information shall be indicated/attached in the price quotation to reflect the complete specifications e.g., brand name, model, pictures/brochures of the offer.
- 4. Quotation must be inclusive of all costs and applicable government taxes, including delivery charges.
- 5. Award of the contract shall be made to the lowest complying/responsive bid/offer.
- 6. Price validity shall be forty five (45) calendar days from the deadline of subm

For those with ABCs above	e Fifty Thousand Pesos (PhP50,000.00), suppliers shall submit copies of the port of their quotation, to wit:
7.1 Current Mayor' 7.2 DTI/SEC Certifi 7.3 BIR Certificate of 7.4 PhilGEPS Regist 7.5 Omnibus Sworn 7.6 Income/Busine 7.7 Professional Lic 7.8 PCAB License (I	s/Business Permit cate of Registration of Registration tration Certificate (Platinum) all pages of Statement ss Tax Return cense/Curriculum Vitae (Consulting Services)
provision shall be ground for 9. Payment shall be made only 10. Supplier warrants that all go 11. Delivery period shall be indishall be charged as liquidated 12. Payment shall be made upon	ole for the source/s of its goods/services/equipment, and which shall be in le and specifications of the RFQ or PO. Failure of the supplier to comply with this r cancellation of the award or purchase order issued to the supplier. upon completion and acceptance by the PHilMech. ods/services/equipment to be provided are of acceptable industry standard. icated in the quotation. A penalty of 1/10 of one percent for every day of delay d damages on the undelivered items/services. On inspection and acceptance of delivery subject to prior submission of sales other requirements as maybe necessary
In conformity with the Direct	t Payment Scheme via bank debit system, please credit/deposit payment to:
Name of Bank:Bank Branch:	
Account Name: Account No.:	
	d the General Conditions attached to the Request for Quotation, I/We quote you
	Printed name and signature of Authorized Representative
	Designation:
	Company Name:
	Business Address:
	PhilGEPS Registration No.

TIN:

Email Address: ___

Contact No/s.: