



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. 141/142/143/144;
 Email add.: amp@philmech.gov.ph

REQUEST FOR QUOTATION

RFQ No. : R-23-05-275
 PR No. : 23-05-G-247

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 June 5, 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.


 MAY 29 2023
RAYMUND JOSEPH P. MACARANAS
 Authorized Official

 Buyer/Canvasser

ITEM NO.	QTY.	UNIT	ITEM AND DESCRIPTION		UNIT PRICE	TOTAL PRICE
			Per Request	Offer/Brand/Model		
1			Food, Venue and Accommodation for the conduct of the Training Course on the Operation and Maintenance of Rice Machinery in Tandag City, Surigao del Sur on June 12-16, 2023.			
			June 11, 2023 Dinner Accommodation			
	35	pax				
	35	pax				
			June 12, 2023 Breakfast AM snacks Lunch PM snacks Dinner Accommodation			
	47	pax				
	47	pax				
	47	pax				
	47	pax				
	47	pax				
	47	pax				
	47	pax				
			June 13, 2023 Breakfast AM snacks Lunch PM snacks Dinner Accommodation			
	47	pax				
	47	pax				
	47	pax				
	47	pax				
	47	pax				
	47	pax				
			June 14, 2023 Packed Breakfast Packed AM snacks Packed Lunch Packed PM snacks Dinner			
	57	pax				
	57	pax				
	57	pax				
	57	pax				
	50	pax				



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50	pax	Accommodation			
100	pc	Bottled water (1 L)			
		June 15, 2023			
57	pax	Packed Breakfast			
57	pax	Packed AM snacks			
57	pax	Packed Lunch			
57	pax	Packed PM snacks			
50	pax	Dinner			
50	pax	Accommodation			
100	pc	Bottled water (1 L)			
		June 16, 2023			
47	pax	Breakfast			
47	pax	AM snacks			
47	pax	Lunch			
47	pax	PM snacks			
7	pax	Dinner			
7	pax	Accommodation			
		Additional Requirements:			
		- 2 pax per room only and airconditioned			
		- Meals: 3 main courses (seafoods, chicken/pork/beef & vegetables) + dessert+ soup+ drinks +unlimited rice			
		-Inclusive of airconditioned training hall for 46 pax with sound system, LCD projector and laptop			
		- With free flowing brewed coffee			
		With stable internet connection			
		- Venue shall be within or nearby the hands-on site			
		Which is at maximum of 35 km			
		-70%guaranteed pax			
		- Non-use of unnecessary single-use plastics for meals und snacks (plastics spoon, fork, cups, straws, stirvers, knives and thin-filmed sando bags)			

Delivery Period : _____
 Price validity : _____
 Warranty : _____
 Terms of Payment : _____



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General Conditions

14. The Approved Budget for the Contract (ABC) is 541,500.00.
15. Specifications herein provided are the minimum requirements of the PHilMech. Hence a supplier must not offer lower specifications than required.
16. 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.
17. Quotation must be inclusive of all costs and applicable government taxes, including delivery charges.
18. Award of the contract shall be made to the lowest complying/responsive bid/offer.
19. Price validity shall be forty five (45) calendar days from the deadline of submission of quotation.
20. For those with ABCs above Fifty Thousand Pesos (PhP50,000.00), suppliers shall submit copies of the following documents in support of their quotation, to wit:

- | | | |
|-------------------------------------|------|--|
| <input checked="" type="checkbox"/> | 7.1 | Current Mayor's/Business Permit |
| <input type="checkbox"/> | 7.2 | DTI/SEC Certificate of Registration |
| <input checked="" type="checkbox"/> | 7.3 | BIR Certificate of Registration |
| <input checked="" type="checkbox"/> | 7.4 | PhilGEPS Registration Certificate (Platinum) all pages |
| <input checked="" type="checkbox"/> | 7.5 | Omnibus Sworn Statement |
| <input checked="" type="checkbox"/> | 7.6 | Income/Business Tax Return |
| <input type="checkbox"/> | 7.7 | Professional License/Curriculum Vitae (Consulting Services) |
| <input type="checkbox"/> | 7.8 | PCAB License (Infra.) |
| <input type="checkbox"/> | 7.9 | Net Financial Contracting Capacity (NFCC) |
| <input type="checkbox"/> | 7.10 | Documents required as stated in the Technical Specifications |
| <input type="checkbox"/> | 7.11 | Others |

21. Supplier shall be responsible for the source/s of its goods/services/equipment, and which shall be in accordance with the schedule and specifications of the RFQ or PO. Failure of the supplier to comply with this provision shall be ground for cancellation of the award or purchase order issued to the supplier.
22. Payment shall be made only upon completion and acceptance by the PHilMech.
23. Supplier warrants that all goods/services/equipment to be provided are of acceptable industry standard.
24. Delivery period shall be indicated in the quotation. A penalty of 1/10 of one percent for every day of delay shall be charged as liquidated damages on the undelivered items/services.
25. Payment shall be made upon inspection and acceptance of delivery subject to prior submission of sales invoice/delivery receipt and other requirements as maybe necessary
26. In conformity with the Direct Payment Scheme via bank debit system, please credit/deposit payment to:

Name of Bank: _____
Bank Branch: _____
Account Name: _____
Account No.: _____

After having carefully read and accepted the General Conditions attached to the Request for Quotation, I/We quote you on the item/s at prices indicated above.

Printed name and signature of Authorized Representative
Designation: _____
Company Name: _____
Business Address: _____
~~PhilGEPS Registration No.:~~ _____
TIN: _____
Contact No/s.: _____
Email Address: _____