



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](mailto:amp@philmech.gov.ph)

## REQUEST FOR QUOTATION

RFQ No. : R-23-06-311  
 PR No. : 23-06-G-279

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 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**  
 Authorized Official

Buyer/Canvasser

ITEM NO.	QTY.	UNIT	ITEM AND DESCRIPTION	UNIT PRICE	TOTAL PRICE
			Per Request		
				Offer/Brand/Model	
1			<b>Food and Accommodation for the conduct of the Technology Demonstration of the Crop Establishment Technologies in Baybay, Leyte on June 24-27, 2023</b>  <b>June 24, 2023(Arrival)</b> 13 pax Dinner 13 pax Accommodation ( 2 pax per room only and airconditioned)		
			<b>June 25, 2023</b> 13 pax Breakfast 13 pax AM Snacks 13 pax Lunch 13 pax PM Snacks 13 pax Dinner 13 pax Accommodation (2 pax per room only and airconditioned)		
			<b>June 26, 2023</b> 60 pax Packed Breakfast 60 pax Packed AM Snacks 60 pax Packed Lunch 60 pax Packed PM Snacks 60 pax Dinner 13 pax Accommodation (2 pax per room only and airconditioned)		
			<b>June 27, 2023</b> 13 pax Breakfast 13 pax AM Snacks		



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			<p><b>Additional Requirement:</b>          *Meals: 3 main courses (seafoods, pork beef/chicken &amp; vegetable) + desserts + soup + drinks          *With free flowing coffee          *Comply/ provide health protocols implemented by Provincial IATF          *75% guaranteed pax          *With stable internet connection          *Venue shall be within or nearby the hands-on site which is at maximum of 35km or 1-hr travel time          *Non-use of the identified unnecessary single use plastics cups- lower than 0.2mm thickness, drinking straws, coffee stirrers, spoons, forks, knives, plastic labo, and thin filmed sando bags)</p>		
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Delivery Period : \_\_\_\_\_  
 Price validity : \_\_\_\_\_  
 Warranty : \_\_\_\_\_  
 Terms of Payment : \_\_\_\_\_



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### General Conditions

1. The Approved Budget for the Contract (ABC) is 105,600.00.
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 submission of quotation.
7. 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 checked="" type="checkbox"/> | 7.2  | DTI/SEC Certificate of Registration                          |
| <input checked="" type="checkbox"/> | 7.3  | BIR Certificate of Registration                              |
| <input type="checkbox"/>            | 7.4  | PhilGEPS Registration Certificate (Platinum) all pages       |
| <input type="checkbox"/>            | 7.5  | Omnibus Sworn Statement                                      |
| <input 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   |

8. 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.
9. Payment shall be made only upon completion and acceptance by the PHilMech.
10. Supplier warrants that all goods/services/equipment to be provided are of acceptable industry standard.
11. 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.
12. 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
13. 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: \_\_\_\_\_