



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.: Email add.: amp@philmech.gov.ph

REQUEST FOR QUOTATION

RFQ No. : R-23-10-498
 PR No. : 23-10-G-467

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 October 9, 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			Food, training venue, and accommodation for the preparation and conduct of the following activities on October 23-28, 2023 in Ubay, Bohol or nearby town: 1.) Training-Workshop on Farm Machinery Operation, Management and Enterprise Development; 2.) Learning Session on Crop Establishment Technologies; and 3.) Learning Session on the Use of Farm Machinery Utilization Record Book		
	4	pax	October 23,2023 PM Snacks		
	4	pax	Dinner		
	4	pax	Accommodation (Air-conditioned, 2-3 pax sharing room)		
	4	pax	October 24, 2023 Breakfast		
	45	pax	AM Snacks		
	45	pax	Lunch		
	4	pax	PM Snacks		
	4	pax	Dinner		
	4	pax	Accommodation (Air-conditioned, 2-3 pax sharing room)		
	22	pax	October 25, 2023 (with training venue) Breakfast		
	27	pax	AM Snacks		
	27	pax	Lunch		
	27	pax	PM Snacks		
	27	pax	Dinner		
	7	pax	Accommodation (Air-conditioned,		



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			2-3 pax sharing room)		
			October 26, 2023 (with training		
	25	pax	Breakfast		
	27	pax	AM Snacks		
	27	pax	Lunch		
	27	pax	PM Snacks		
	27	pax	Dinner		
	7	pax	Accommodation (Air-conditioned, 2-3 pax sharing room)		
			October 27, 2023 (with training venue)		
	25	pax	Breakfast		
	27	pax	AM Snacks		
	27	pax	Lunch		
	14	pax	PM Snacks		
	4	pax	Dinner		
	4	pax	Accommodation (Air-conditioned, 2-3 pax sharing room)		
			October 28, 2023 (Saturday)		
	4	pax	Breakfast		
	4	pax	AM Snacks		
			Additional Requirements:		
			- Meals: 3 main courses (seafoods, pork/beef/chicken & vegetables) + dessert + soup + drinks		
			-With free flowing coffee/choco drink/tea		
			-Airconditioned training venue		
			-Hall/Conference room that can accommodate about 35 pax		
			following the IATF guidelines with LCD projector, laptop and audio- visual/sound system		
			- 80% guaranteed pax		

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



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General Conditions

1. The Approved Budget for the Contract (ABC) is 144,000.00.
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 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: _____