



Republic of the Philippines
 Department of Agriculture
Philippine Center for Postharvest Development and Mechanization
 Science City of Muñoz, Nueva Ecija, Philippines
 Telephone Nos. 09178004526 (Globe); 09178130852 (Globe) loc. 144/142/142/144
 Email add.: amp@philmech.gov.ph

REQUEST FOR QUOTATION

RFQ No. : R-24-04-181
 PR No. : 24-04-G-164

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 April 29, 2024.

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.

 Buyer/Canvasser

RICHELLE ANN L. MOROTA
 Authorized Official

ITEM NO.	QTY.	UNIT	ITEM AND DESCRIPTION		UNIT PRICE	TOTAL PRICE
			Per Request	Offer/Brand/Model		
1	2	lot	Photo and video documentary Locations: Lot 1: Bacnotan, La Union: May 2-3, 2024 Calapan City, Oriental Mindoro: May 9-11, 2024			
2	1	lot	Lot 2. Cuartero, Capiz: May 1-3, 2024			
3	1	lot	Lot 3: Ubay, Bohol: May 7-10, 2024			
4	2	lot	Lot 4: Prosperidad, Agusan Del Sur: May 15-17, 2024 Mamasapano, Maguindanao: May 7-9, 2024 General specifications per lot/locations: Video: a. 2 minutes high definition video production in MP4 format for each lot b. With English subtitle for non-tagalog dialect (to be provided/translated by the service provider) c. Inclusive of three (3) location shooting/on-site / video interview per lot Note: Cinematic documentary peg Photo: d. 15-20 best-processed photos			



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		<p>per location sent via google drive</p> <p>Postproduction services:</p> <ul style="list-style-type: none"> a. Musical scoring and synchronization b. Professional voice over (if applicable) c. Editing d. No video/ photo presets (Allow 3 minimal revisions of the video) <p>PRODUCTION DEADLINE:</p> <ul style="list-style-type: none"> *Service provider must submit the 1st video draft and raw photos three (3 days) after location shooting *Service provider must submit the final approved video on May 20-24, 2024 <p>Requirements:</p> <ul style="list-style-type: none"> a. Storyboard / script/ guide questions will be provided by ACD-PHilMech b. With full-production equipment/ with high quality audio recording during interview c. Delivery production: Final output to be saved in google drive together with the raw photos and video footages d. Raw project file to be provided (after approval of the video) to ACD-PHilMech e. Transportation, food, and accomodation during the shooting will be shouldered by the supplier 			
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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 Lot 1: 98,000.00, Lot 2: 49,000.00, Lot 3: 49,000.00, Lot 4: 98,000.00.
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: _____