

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

1.\_\_

RFQ No.: <u>25-06-881</u> PR No.: <u>25-06-E-643</u>

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 <u>June 24, 2025</u>.

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/Ca	Authorized Official				
ITEM NO.	QTY.	UNIT	ITEM AND DES	CRIPTION	UNIT PRICE	TOTAL PRICE
			Per Request	Offer/Brand/Model		
1	1,800	unit	Notarization of various documents *up to 200 sets of documents are signed and ready for pick-up within 5 days *up to 350 sets of documents are signed and ready for pick-up within 8 days *up to 500 sets of documents are signed and ready for pick-up within 10 days	OfferyBrandyModel		

Terms of Payment	·
PHilMech-IP-F-004	Rev 00 (01.27.25)

Delivery Period Price validity Warranty



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#### **General Conditions**

Bank Branch: \_ Account Name: \_\_\_ Account No.: \_

7 1

- 1. The Approved Budget for the Contract (ABC) is 180,000.00.
- 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.
- 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.
- 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:

		7.1	Current Mayor's/Business Permit
		7.2	DTI/SEC Certificate of Registration
		7.3	BIR Certificate of Registration
		7.4	PhilGEPS Registration Certificate (Platinum) all pages
		7.5	Omnibus Sworn Statement
		7.6	Income/Business Tax Return
		7.7	Professional License/Curriculum Vitae (Consulting Services)
		7.8	PCAB License (Infra.)
		7.9	Net Financial Contracting Capacity (NFCC)
		7.10	Documents required as stated in the Technical Specifications
		7.11	Others
8.	with the scl	hedule and	onsible for the source/s of its goods/services/equipment, and which shall be in accordance specifications of the RFQ or PO. Failure of the supplier to comply with this provision shall tion of the award or purchase order issued to the supplier.
9.			e only upon completion and acceptance by the PHilMech.
10.	Supplier wa	arrants tha	t all goods/services/equipment to be provided are of acceptable industry standard.
11.			be indicated in the quotation. A penalty of 1/10 of one percent for every day of delay shall be damages on the undelivered items/services.
12.			ade upon inspection and acceptance of delivery subject to prior submission of sales
			pt and other requirements as maybe necessary
13.			Direct Payment Scheme via bank debit system, please credit/deposit payment to:
	Name of Bar	ık.	

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.

Control of the Contro
Printed name and signature of Authorized Representative
Designation:
Company Name:
Business Address:
PMIGEPS Registration No.:
ΓΙΝ:
Contact No/s.:
Email Address: