# **REQUEST FOR QUOTATION**



Republic of the Philippines Department of Agriculture **BUREAU OF FISHERIES AND AQUATIC RESOURCES BIDS AND AWARDS COMMITTEE** Arellano Blvd., Cebu City Tel.No.:(032) 239-3820 local 106/09976619824 E-mail: bacbfar7@gmail.com

Name of Company/Business

**Complete Company Name Address** 

Taxpayer Identification No. (TIN)

PhilGeps Registration No.

To whom it may concern:

Please quote your best offer for the item/s described herein, subject to the **Terms and Condition** attached of this Request for Quotation. Submit your duly signed Quotation in a sealed envelope not later than the deadline on\_\_\_\_\_\_ **at 4:00 PM** at **BFAR-7** BAC - office 3rd floor, Arellano Blvd. Cebu City together with the required documents, to wit:

- Valid & Current Business/Mayor's Permit
- PhilGeps Certificate
- Income Tax Return; and
- Professional License / Curriculum vitae (if consulting services)
- PCAB License (if INFRASTRUCTURE)

- Menu (if Catering Services)

Proposals may be submitted through electronic mail at bacbfar7@gmail.com.

|                                       |  |      |      |  | LUZVIMINDA R.                                    |             |
|---------------------------------------|--|------|------|--|--|-------------|
|                                       |  |      |      |  | BAC Chairpers                                    |             |
| PLEASE QUOTE: <b>PER ITEM/PER LOT</b> |  |      |      |  | SUPPLIER/CONTRACTOR/CONSULTANT'S<br>PROPOSAL BOX |             |
|                                       | ITEM DESCRIPTION<br>(ITEM NAME & TECHNICAL SPECIFICATION)      |      | UNIT | APPROVED<br>BUDGET OF<br>CONTRACT<br>(ABC) | FINANCIAL PROPOSAL<br>(Indicate the Price Offer) |             |
| No.                                   |  | QTY. |      |  |  |             |
|                                       |  |      |      |  | UNIT PRICE                                       | TOTAL PRICE |
|                                       |  |      |      | 37,000.00                                  |  |             |
|                                       |  |      |      |  |  |             |
| 1                                     | Clutch Assembly  | 1    | set  |  |  |             |
|                                       | Steering System  | 1    | set  |  |  |             |
| 3                                     | Front shock absorber   | 2    | pcs  |  |  |             |
|                                       |  |      |      |  |  |             |
|                                       |  |      |      |  |  |             |
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|                                       |  |      |      |  |  |             |
|                                       | PFO - Neg. Or.   |      |      |  |  |             |
|                                       | Supply of labor and materials for Repair and Maintenance of RP |      |      |  |  |             |
|                                       | Vehicle used at PFO - Neg. Or.                                 |      |      |  |  |             |
|                                       |  |      |      |  |  |             |
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SUPPLIER/CONTRACTOR/CONSULTANT'S CERTIFICATION

After having carefully read and accepted your Terms and Conditions, I/we quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in <u>Twenty Five (25) calendar days</u> to be delivered at Neg. Or. Province from receipt of the Purchase Order/Notice of Award

Printed Name and Signature of Authorized Representative

Official Contact No./Mobile No.

Date

(PLEASE SEE TERM AND CONDITION AT THE BACK)



# **REQUEST FOR QUOTATION**

REQUEST FOR QUOTATION PROCUREMENT MODE:

REQUEST FOR QUOTATION PROCUREMENT MODE: NP-Small Value Procurement

RFO No: \_

PR No.:

24 - 02 - 420

LUZVIMINDA R. BATO



BUREAU OF FISHERIES AND AQUATIC RESOURCES BIDS AND AWARDS COMMITTEE Arellano Blvd., Cebu City

Tel.No.:(032) 239-3820 local 106/09976619824 E-mail: bacbfar7@gmail.com

Name of Company/Business

Complete Company Name Address

Taxpayer Identification No. (TIN)

PhilGeps Registration No.

To whom it may concern:

Please quote your best offer for the item/s described herein, subject to the **Terms and Condition** attached of this Request for Quotation. Submit your duly signed Quotation in a sealed envelope not later than the deadline on <u>October 12, 2023 at 4:00 PM</u> at BFAR-7 BAC - office 3rd floor, Arellano Blvd. Cebu City together with the required documents, to wit:

- Valid & Current Business/Mayor's Permit

- PhilGeps Certificate
- Income Tax Return; and
- Professional License / Curriculum vitae (if consulting services)
- PCAB License (if INFRASTRUCTURE)

- Menu (if Catering Services)

Proposals may be submitted through electronic mail at bacbfar7@gmail.com.

LUZVIMINDA R. BATO

|                                       |   |             |          |  | BAC Chairper                                     | son  |  |
|---------------------------------------|---|-------------|----------|--|--|--|--|
| PLEASE QUOTE: <b>PER ITEM/PER LOT</b> |   |             |          |  |  | SUPPLIER/CONTRACTOR/CONSULTANT'S<br>PROPOSAL BOX |  |
|                                       | ITEM DESCRIPTION<br>(ITEM NAME & TECHNICAL SPECIFICATION) |             | UNIT     | APPROVED<br>BUDGET OF<br>CONTRACT<br>(ABC) | FINANCIAL PROPOSAL<br>(Indicate the Price Offer) |  |  |
| No.                                   |   | <b>QTY.</b> |          |  |  |  |  |
| NO.                                   |   |             |          |  | UNIT PRICE                                       | TOTAL PRICE                                      |  |
|                                       |   |             |          | 11,500.00                                  |  |  |  |
| 1                                     | Ink Pump Unit   | 1           | рс       |  |  |  |  |
| 2                                     | Inking Noozle Drum  | 1           | рс       |  |  |  |  |
|                                       | Rubber Tension  | 1           | рс       |  |  |  |  |
| 4                                     | Stripper Pad  | 1           | рс       |  |  |  |  |
|                                       | Stripper Base   | 1           | рс       |  |  |  |  |
|                                       | Transfer Built; 14* 0.65* 381                             | 2           | pcs      |  |  |  |  |
|                                       | RISO Ink KZ Type  | 1           | рс       |  |  |  |  |
|                                       |   |             |          |  |  |  |  |
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|                                       | RFTFCD  |             |          |  |  |  |  |
|                                       | Used for One (1) Unit RISO                                |             |          |  |  |  |  |
|                                       |   |             |          |  |  |  |  |
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SUPPLIER/CONTRACTOR/CONSULTANT'S CERTIFICATION

After having carefully read and accepted your Terms and Conditions, I/we quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in <u>7 calendar days</u> to be delivered at Cebu Province from receipt of the Purchase Order/Notice of Award

Printed Name and Signature of Authorized Representative

Official Contact No./Mobile No.

Date

(PLEASE SEE TERM AND CONDITION AT THE BACK)

**REQUEST FOR QUOTATION** 



Republic of the Philippines Department of Agriculture BUREAU OF FISHERIES AND AQUATIC RESOURCES BIDS AND AWARDS COMMITTEE

#### **NP-Small Value Procurement**

Date: \_\_\_\_\_\_ RFQ No.: \_\_\_\_\_\_

PR No.: <u>23 - 09 - 1692</u>

REQUEST FOR QUOTATION PROCUREMENT MODE: NP-Small Value Procurement



Arellano Blvd., Cebu City Tel.No.:(032) 239-3820 local 106/09976619824 E-mail: bacbfar7@gmail.com

Name of Company/Business

**Complete Company Name Address** 

Taxpayer Identification No. (TIN)

## PhilGeps Registration No.

#### To whom it may concern:

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- Valid & Current Business/Mayor's Permit

- PhilGeps Certificate
- Income Tax Return; and
- Professional License / Curriculum vitae (if consulting services)
- PCAB License (if INFRASTRUCTURE)
- Menu (if Catering Services)

Proposals may be submitted through electronic mail at bacbfar7@gmail.com.

|                                       | Proposais may be submitted through electronic mail at bactrar/@gmail.com. |              |         |  | LUZVIMINDA R.<br>BAC Chairpers                   |  |  |
|---------------------------------------|---|--------------|---------|--|--|--|--|
| PLEASE QUOTE: <b>PER ITEM/PER LOT</b> |   |              |         |  |  | SUPPLIER/CONTRACTOR/CONSULTANT'S<br>PROPOSAL BOX |  |
|                                       |   |              |         | APPROVED<br>BUDGET OF<br>CONTRACT<br>(ABC)   | FINANCIAL PROPOSAL<br>(Indicate the Price Offer) |  |  |
| No.                                   | ITEM DESCRIPTION<br>(ITEM NAME & TECHNICAL SPECIFICATION)                 | <b>QTY</b> . | UNIT    |  |  |  |  |
|                                       |   |              |         |  | UNIT PRICE                                       | TOTAL PRICE                                      |  |
|                                       |   |              |         | 11,500.00                                    |  |  |  |
|                                       | Ink Pump Unit   | 1            | рс      |  |  |  |  |
|                                       | Inking Noozle Drum  | 1            | рс      |  |  |  |  |
|                                       | Rubber Tension  | 1            | рс      |  |  |  |  |
| 4                                     | Stripper Pad  | 1            | рс      |  |  |  |  |
| 5                                     | Stripper Base   | 1            | рс      |  |  |  |  |
|                                       | Transfer Built; 14* 0.65* 381   | 2            | pcs     |  |  |  |  |
| 7                                     | RISO Ink KZ Type  | 1            | рс      |  |  |  |  |
|                                       |   |              |         |  |  |  |  |
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|                                       | RFTFCD  |              |         | † †  |  |  |  |
|                                       | Used for One (1) Unit RISO  |              | l       | 1 1  |  |  |  |
|                                       |   |              | 1       | 1 1  |  |  |  |
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SUPPLIER/CONTRACTOR/CONSULTANT'S CERTIFICATION

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Printed Name and Signature of Authorized Representative

Official Contact No./Mobile No.

Date

(PLEASE SEE TERM AND CONDITION AT THE BACK)



# REQUEST FOR QUOTATION Republic of the Philippines Department of Agriculture

BUREAU OF FISHERIES AND AQUATIC RESOURCES BIDS AND AWARDS COMMITTEE Arellano Blvd., Cebu City

### Date: \_\_\_\_\_\_ RFQ No.: \_\_\_\_\_ PR No.: <u>23 - 09 - 1692</u>

REQUEST FOR QUOTATION PROCUREMENT MODE: NP-Small Value Procurement Tel.No.:(032) 239-3820 local 106/09976619824 E-mail: bacbfar7@gmail.com

Name of Company/Business

Complete Company Name Address

Taxpayer Identification No. (TIN)

PhilGeps Registration No.

## To whom it may concern:

Please quote your best offer for the item/s described herein, subject to the **Terms and Condition** attached of this Request for Quotation. Submit your duly signed Quotation in a sealed envelope not later than the deadline on <u>December 8, 2023 at 4:00 PM</u> at BFAR-7 BAC - office 3rd floor, Arellano Blvd. Cebu City together with the required documents, to wit:

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- PhilGeps Certificate
- Income Tax Return; and
- Professional License / Curriculum vitae (if consulting services)
- PCAB License (if INFRASTRUCTURE)
- Menu (if Catering Services) Proposals may be submitted through electronic mail at bacbfar7@gmail.com.

LUZVIMINDA R. BATO

|                                       |   |      |       |                                |                            | BAC Chairperson                |  |  |
|---------------------------------------|---|------|-------|--------------------------------|----------------------------|--------------------------------|--|--|
| PLEASE QUOTE: <b>PER ITEM/PER LOT</b> |   |      |       |                                |                            | ACTOR/CONSULTANT'S<br>OSAL BOX |  |  |
|                                       |   |      |       | APPROVED                       | FINANCIAL PROPOSAL         |                                |  |  |
| No.                                   | ITEM DESCRIPTION<br>(ITEM NAME & TECHNICAL SPECIFICATION) | QTY. | UNIT  | BUDGET OF<br>CONTRACT<br>(ABC) | (Indicate the Price Offer) |                                |  |  |
|                                       |   | ų    |       |                                | UNIT PRICE                 | TOTAL PRICE                    |  |  |
|                                       |   |      |       | 12,000.00                      |                            |                                |  |  |
|                                       | Electric Fan, (Wall or Stand Fan)                         | 2    | units |                                |                            |                                |  |  |
|                                       |   |      |       |                                |                            |                                |  |  |
|                                       |   |      |       |                                |                            |                                |  |  |
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|                                       | NOAD  |      |       |                                |                            |                                |  |  |
|                                       | NSAP<br>Used for NSAP Office                              |      |       |                                |                            |                                |  |  |
|                                       | Used for NSAP Office                                      |      |       |                                |                            |                                |  |  |
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SUPPLIER/CONTRACTOR/CONSULTANT'S CERTIFICATION

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Printed Name and Signature of Authorized Representative

Official Contact No./Mobile No.

Date

(PLEASE SEE TERM AND CONDITION AT THE BACK)

PR No.:

RFQ No.:

Date:

23 - 11 - 2115