

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

REQUEST FOR QUOTATION
PROCUREMENT MODE:
NP-Small Value Procurement

RFO No: _____

PR No.: 24 - 02 - 434

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 **March 18, 2024 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. BATO
 BAC Chairperson

PLEASE QUOTE: <u>PER ITEM/PER LOT</u>					SUPPLIER/CONTRACTOR/CONSULTANT'S PROPOSAL BOX	
No.	ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION)	QTY.	UNIT	APPROVED BUDGET OF CONTRACT (ABC)	FINANCIAL PROPOSAL	
					(Indicate the Price Offer)	
				3,730.00	UNIT PRICE	TOTAL PRICE
1	Plastic gloves	3	pairs			
2	Shovel, small	2	pcs			
3	Fine mesh net	8	mtrs			
4	Seeding tray	2	pcs			
5	Eco cup	4	pck			
6	Vegetables seeds	2	pck			
	PFO - Bohol Farm Inputs and Implements used for Aquaponics					

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 **Twenty Five (25) calendar days** to be delivered at **Bohol 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)

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