REQUEST FOR QUOTATION



REQUEST FOR QUOTATION PROCUREMENT MODE: NP-Small Value Procurement

Tel.No.:(032) 239-3820 local 106/09976619824 E-mail: bacbfar7@gmail.com				
		RFO No:		
Name of Company/Business	•	PR No.:	24 - 02 - 565	
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>March 15, 2024 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 bacbfar 7 @gmail.com.

LUZVIMINDA R. BATO

BAC Chairperson

					BAC Chairperson		
PLEASE QUOTE: <u>PER ITEM/PER LOT</u>						SUPPLIER/CONTRACTOR/CONSULTANT'S PROPOSAL BOX	
				APPROVED	FINANCIAL PROPOSAL (Indicate the Price Offer)		
No.	ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION)	QTY.	UNIT	BUDGET OF			
			J	CONTRACT (ABC)	UNIT PRICE	TOTAL PRICE	
				42,550.00			
	Catering Services						
	Day 1						
	AM & PM Snacks						
	Lunch						
	Day 2						
	AM & PM Snacks						
	Lunch						
	Day 3						
	AM & PM Snacks						
	Lunch						
	24.15.1						
	Day 4						
	AM & PM Snacks						
	Lunch						
	24.15.1						
	Day 5						
	AM & PM Snacks						
	Lunch						
	FPSSD						
	To be served during the Capacity and Hands-on Training on Salt						
	Production in Punta Cruz 1, Maribojoc,Bohol						
	,,						
_							

SUPPLIER/CONTRACTOR/CONSULTANT'S CERTIFICATION

After having carefully read and accepted your Terms and Conditions, I/we quote you on th	e item/s at price/s noted above for immediate delivery and
shipment which can be made in <u>Five (5) calendar days</u> 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)





BUREAU OF FISHERIES AND AQUATIC RESOURCES BIDS AND AWARDS COMMITTEE

Arellano Blvd., Cebu City

10.110.1032/ 233 3020 1004 100/03370013024 E main. sacasjar/eg/main.com	D	ate:	
Name of Company/Business	- R	FQ No.:	
	PI	R No.:	23 - 09 - 1692
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 bacbfar 7@gmail.com.

LUZVIMINDA R. BATO

BAC Chairperson

PLEASE QUOTE: <u>PER ITEM/PER LOT</u>						ACTOR/CONSULTANT'S OSAL BOX		
		QTY.				APPROVED	FINANCIAL PROPOSAL	
No.	ITEM DESCRIPTION		UNIT	BUDGET OF	(Indicate the Price Offer)			
	(ITEM NAME & TECHNICAL SPECIFICATION)			CONTRACT (ABC)	UNIT PRICE	TOTAL PRICE		
				11,500.00				
	Ink Pump Unit	1	рс					
2	Inking Noozle Drum	1	рс					
	Rubber Tension	1	рс					
	Stripper Pad	1	рс					
5	Stripper Base	1	рс					
	Transfer Built; 14* 0.65* 381	2	pcs					
7	RISO Ink KZ Type	1	рс					
	RFTFCD							
	Used for One (1) Unit RISO							
	2000 10. 0.10 (.) DIRECTION							
				1				
				1				

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 7 calendar days 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



REQUEST FOR QUOTATION PROCUREMENT MODE: NP-Small Value Procurement

		Date:
Name of Com	pany/Business	RFQ No.:
		PR No.: <u>23 - 09 - 1692</u>
Complete Cor	npany Name Address	
Taxpayer Idei	ntification No. (TIN)	
PhilGeps Regi	stration No.	
To whom it	may concern:	
	Please quote your best offer for the item/s described herein, subject to the Terms and C	Condition attached of this Request for Quotation
	Submit your duly signed Quotation in a sealed envelope not later than the deadline on C	October 12. 2023 at 4:00 PM at BFAR-7 BAC -

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

office 3rd floor, Arellano Blvd. Cebu City together with the required documents, to wit:

- 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: PER ITEM/PER LOT						ACTOR/CONSULTANT'S OSAL BOX
	ITEM DESCRIPTION		APPROVED BUDGET OF	FINANCIAL PROPOSAL (Indicate the Price Offer)		
No.	(ITEM NAME & TECHNICAL SPECIFICATION)	QTY.	UNIT	CONTRACT (ABC)	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			
6	Transfer Built; 14* 0.65* 381	2	pcs			
7	RISO Ink KZ Type	1	рс			
	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 7 calendar days to be delivered at Cebu Province from receipt of the Purchase Order/Notice of Award

Printed Name and Signature o Authorized Representative	of
Official Contact No./Mobile No	0.
Date	

(PLEASE SEE TERM AND CONDITION AT THE BACK)

REQUEST FOR QUOTATION

Department of Agriculture

Tel.No.:(032) 239-3820 local 106/09976619824 E-mail: bacbfar7@gmail.com				Date:		
Name of Company/Business	_			RFQ No.:		
Complete Company Name Address	_				-	
Taxpayer Identification No. (TIN)	_					
PhilGeps Registration No.	_					
Please quote your best offer for the item/s described herein, subject Submit your duly signed Quotation in a sealed envelope not later the	an the dead	lline on De				
 Valid & Current Business/Mayor's Permit PhilGeps Certificate Income Tax Return; and Professional License / Curriculum vitae (if consulting services) PCAB License (if INFRASTRUCTURE) 						
PLEASE QUOTE: PER ITEM/PER LOT				SUPPLIER		CTOR/CONSULTANT'S
ITEM DESCRIPTION	Q ТҮ.	UNIT	APPROVED BUDGET OF CONTRACT (ABC)	FINANCIAL PROPOSAL		L PROPOSAL
(ITEM NAME & TECHNICAL SPECIFICATION)						TOTAL PRICE
			12,000.00			
Electric Fan, (Wall or Stand Fan)	2	units				
NSAP						
Used for NSAP Office						
	1		1	1		
	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 Submit your duly signed Quotation in a sealed envelope not later the office 3rd filoor, Arellano Blvd. Cebu City together with the required - 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. PLEASE QUOTE: PER ITEM/PER LOT ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION) Electric Fan, (Wall or Stand Fan) Electric Fan, (Wall or Stand Fan)	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 Ten Submit your duly signed Quotation in a sealed envelope not later than the dead office 3rd floor, Arellano Blvd. Cebu City together with the required documents - Valid & Current Business/Mayor's Permit - PhilGeps Certificate - Income Tax Return; and - Professional License / Curriculum vitae (if consulting services) - PCAB License (if InFRASTRICTURE) - Menu (if Catering Services) Proposals may be submitted through electronic mail at bacbfar7@gmail.com. PLEASE QUOTE: PER ITEM/PER LOT ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION) QTV. Electric Fan, (Wall or Stand Fan) 2 NSAP	Complete Company/Business Complete Company Name Address Taxpayer Identification No. (TIN) Philiceps Registration No. To whom it may concern: Please quote your best offer for the item/s described herein, subject to the Terms and Consumity your duly signed Quotation in a sealed envelope not later than the deadline on Decoffice 3rd floor, Arellano Blvd. Cebu City together with the required documents, to wit: - Valid & Current Business/Mayor's Permit - Philiceps Certificate - Income Tax Return; and - Professional License (Turriculum vitae (if consulting services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) - Menu (i	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 attache Submit your duly signed Quotation in a sealed envelope not later than the deadline on December 8, 202 office 3rd floor, Arellano Bivd. Cebu City together with the required documents, to wit: - Valid & Current Business/Mayor's Permit - PhilGeps Certificate - Income Tax Return; and - Professional Litense / Curriculum vitae (if consulting services) - PCAB License (if INFRASTRUCTURE) - Menu (if Catering Services) PLEASE QUOTE: PER LITEM/PER LOT ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION) QTV. UNIT APPROVED SUDGET OF CONTRACT [ARC] 12,000.00 Electric Fan, (Wall or Stand Fan) 2 units NSAP	Name of Company/Business Complete Company Name Address Taxpayer Identification No. (TIN) Philicops 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 Requestion in a sealed envelope not later than the deadline on December 8, 2023 at 4:00 PM a office 3rd floor, Areliano Blvd. Cebu City together with the required documents, to wit: - Valid & Current Business/Mayor's Permit - Philicops Certificate - Income Tax Return; and - Professional License / Curriculum vitae (if consulting services) - Proposals may be submitted through electronic mail at bacbfar?@gmail.com. PLEASE QUOTE: PER ITEM/PER LOT ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION) TOWN TOWN TOWN TOWN TOWN TOWN TOWN TOWN	Name of Company/Business Complete Company Name Address Taypayer Identification No. (TIN) Philiceps 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 Combinity your duty signed Quotation in a sealed envelope not later than the deadline on December 8, 2023 at 4:00 PM at BFAR-office 3rd floor, Arcilano Bixd. Cebu City together with the required documents, to wit: - Valid & Current Business/Mayor's Permit - Philiceps Certificate - Income Tax Return; and - Professional License / Curriculum vitae (If consulting services) - Proposals may be submitted through electronic mail at bachfar/@gmail.com. PLEASE QUOTE: PER ITEM/PER LOT TIEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION) TIEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATION) Electric Fan, (Wall or Stand Fan) 2 units - 12,000.00 Electric Fan, (Wall or Stand Fan) 2 units - 12,000.00 Electric Fan, (Wall or Stand Fan) RIGHT AND COMPANY AND COMP

shipment which can be made in <u>Twenty Five (25) 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)