



Philippine Rice Research Institute

BICOL STATION

REQUEST FOR QUOTATION

Date: _____

Project Number: _____

Reference PR RCP20-09-0189
Number: _____

Sir/Madam:

Please quote your best offer for the item/s listed below, subject to the Terms and Conditions provided. Submit your quotation duly signed by you or your duly authorized representative through email at (gfdelacruz@philrice.gov.ph - if sealed, addressed to Mr. Gideon F. Dela Cruz) or fax at 0928-721-2308 not later than **September 14, 2020**.

[original signed]

GIDEON F. DELA CRUZ

Canvasser

[original signed]

VICTORIA C. LAPITAN

Director, PhilRice Bicol

PROCUREMENT TERMS AND CONDITIONS

- The Approved Budget for the Contract (ABC) is **PhP 450,200.00**
- Prices quoted are subject to deduction of 5% VAT & 1% EWT (*for goods*) or 5% VAT & 2% EWT (*for services*).
- Goods, supplies, equipment, or work done are subject to inspection/acceptance, PhilRice reserves the right to cancel, reject, or rebid the items which do not conform with the specifications.
- Complete technical specifications, brand, and model** must be indicated in the price quotation for evaluation purposes.
- Delivery period shall be indicated in the quotation. Liquidated damages equivalent to 1/10 of 1% per day of delay for the value of undelivered items shall be imposed.
- All bids in excess of the ABC will be rejected.
- Supplier warrants that s/he has not given nor promised to give any money or gift to any PhilRice employee to secure this offer and to obtain an award.
- NEW** suppliers or those without updated file of the required documents are required to submit a photocopy of **valid Mayor's Business Permit** and **valid PhilGEPS Registration Number PRIOR to the opening/evaluation of offer/s**. A supplier who already submitted an updated copy of these documents is no longer required to submit.
- The winning Bidder is required to submit a photocopy of **Income/Business Tax Return** and original copy of **Omnibus Sworn Statement** prescribed by the GPPB **PRIOR TO PAYMENT** of the goods delivered/services rendered.

Item No.	Quantity	Unit	Item and Description	Unit Price	Total Amount
1	1	lot	Supply, Delivery and Installation of Roller Blinds and Modular Partition:		
	5	set	Roller Blinds, Pleated (combi) with complete accessories, Size: 53" x 100"		
	4	set	Roller Blinds, Pleated (combi) with complete accessories, Size: 53" x 53"		
	1	piece	L-Shape Worktop, Dimension: 134cm x 64cm x 60cm		
	2	piece	Laminated Side Legs, Size: W60cm x H75cm		
	1	piece	Side Partition, Frame Material: Aluminum, Width:6cm, Bottom Panel: H90cm x W200cm,(MFC Laminate,) Top Panel: H45cm xW200cm (Clear Glass)		
	1	piece	Side Partition, Frame Material: Aluminum, Width:6cm, Bottom Panel: H90cm x W130cm,(MFC Laminate,) Top Panel: H45cm xW130cm (Clear Glass)		
	1	piece	Side Partition, Frame Material: Aluminum, Width:6cm, Bottom Panel: H90cm x W175cm,(MFC Laminate,) Top Panel: H45cm xW175cm (Clear Glass)		
	1	piece	Side Partition, Frame Material: Aluminum, Width:6cm, Bottom Panel: H90cm x W220cm,(MFC Laminate,) Top Panel: H45cm xW220cm (Clear Glass)		
	6	piece	Rectangular Worktop, Size: L125cm x W60cm x H75cm		
	150	piece	Small Brackets		
	37	piece	Side Partition, Frame Material: Aluminum, Width:6cm, Bottom Panel: H90cm x W70cm,(MFC Laminate,) Top Panel: H45cm xW70cm (Clear Glass)		
	17	piece	Front Partition, Frame Material: Aluminum, Width: 6cm, Bottom Panel: H90cm x W135cm,(MFC Laminate,) Top Panel: H45cm xW135cm (Clear Glass)		
			nothing follows		
			<i>Note: To be delivered at PhilRice-Bicol, Brgy. Batang, Ligao City, Albay</i>		
			TOTAL		

Delivery Period: ☐ 30 calendar days ☐ 15 calendar days ☐ 7 calendar days ☐ Others: _____

Warranty: ☐ PhilRice Bicol ☐ Others: _____

Price Validity: ☐ 120 calendar days ☐ 60 calendar days ☐ 30 calendar days ☐ Others: _____

Delivery Term: ☐ 1 year ☐ 3 months ☐ Others: _____

Payment Term: ☐ 30 calendar days ☐ 15 calendar days ☐ Others: _____

After having carefully read and accepted your Procurement Terms & Conditions, I/We quote you on the item at prices noted above.

Email Address: _____

Company TIN: _____

Please Check ☒

VAT ☐

Non-VAT ☐

PRINTED NAME/SIGNATURE

Designation: _____

Company Name: _____

Business Address: _____

PhilGEPS Registration No.: _____

Telephone Number: _____



