



Philippine Rice Research Institute

BICOL STATION

REQUEST FOR QUOTATION

(for 2022 Early Procurement)

Quotations must be valid for 120 days or longer

Date: 12/29/21
Project Number: Project 4
Reference PR Number: PR21-12-0036, PR21-12-0037, PR21-12-0038

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 bclbac.secretariat@mail.philrice.gov.ph - if sealed, addressed to Mr. Ian Stallone G. Palima) not later than January 3, 2022.

IAN STALLONE G. PALIMA
Canvasser

MELANIE AILEEN C. DE PERALTA
Assistant Branch Director, DA-PhilRice Bicol

PROCUREMENT TERMS AND CONDITIONS

- The Approved Budget for the Contract (ABC) is **Php 113,699.00**
- 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		Unit Price	Total Amount
			Supply and Delivery of various I.T. Supplies and Equipment for DA-PhilRice Bicol		
1	1	unit	All-in-one Printer (Print-Scan-Copy)		
2	2	piece	Antivirus		
3	2	piece	Computer Laptop		
4	1	unit	Computer Program Software/ License, e.g. Mentimeter, etc		
5	10	bottle	GI-790BK, Black Ink for Canon PIXMA G33000		
6	5	bottle	GI-790C, Cyan Ink for Canon PIXMA G3000		
7	5	bottle	GI-790M, Magenta Ink for Canon PIXMA G3000		
8	5	bottle	GI-790Y, Yellow Ink for Canon PIXMA G3000		
9	2	piece	Microsoft word software		
10	2	bottle	Printer L1110 Ink EPSON 003		
11	2	bottle	Refill ink for Canon G4110 , GI-190BK Black Ink		
12	2	bottle	Refill ink for Canon G4110 , GI-190C, Cyan Ink		
13	2	bottle	Refill ink for Canon G4110 , GI-190M, Magenta Ink		
14	2	bottle	Refill ink for Canon G4110 , GI-190Y, Yellow Ink		
15	3	piece	Refill ink for Epson L3110, Yellow		
16	3	piece	Refill ink for Epson L3110, Black		

17	3	piece	Refill ink for Epson L3110, Cyan		
18	3	piece	Refill ink for Epson L3110, Magenta		
19	10	bottle	Refill Ink for Epson, Black, T664		
20	6	bottle	Refill Ink for Epson, Cyan, T664		
21	6	bottle	Refill Ink for Epson, Magenta, T664		
22	6	bottle	Refill Ink for Epson, Yellow, T664		
			nothing follows		
				TOTAL	

Delivery Period: ☐ 30 calendar days ☐ 15 calendar days ☐ 7 calendar days ☐ Others: _____
 Place Of Delivery: ☒ DA-PhilRice Bicol ☐ Others: _____
 Price Validity: ☐ 120 calendar days ☐ 60 calendar days ☐ 30 calendar days ☐ Others: _____
 Warranty: ☐ 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: _____

