

REQUEST FOR QUOTATION

Alternative Mode of Procurement

S53.9 NP- Small Value Procurement

** Bidder may sign a separate sheet if necessary*

Date: 2/21/2014

RFQ No.: 24-0156

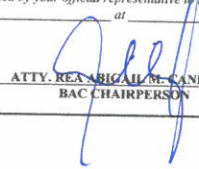
PR No.: R8 24-02-0186

Philgeps Ref. No.: _____

Company Name: _____


Complete Company Address: _____

To whom it may concern :
 Please quote your lowest price/s on the lot or item/s listed below, subject to the **GENERAL CONDITIONS** indicated herein, stating the shortest time of delivery and submit your quotation duly signed by your official representative to the address listed above **not later than:** _____ at _____.

Very truly yours,

ATTY. REA ABIGAIL M. CANDIDO
 BAC CHAIRPERSON

AUTHORIZED CANVASSER'S CERTIFICATION

This is to certify that I have full knowledge, authority and responsibility in distributing and/or collecting the **Request for Quotation (RFQ)** in accordance to the guidelines (including the attachment by the bidder of Documentary Requirements in the **CHECKLIST** below) in securing prices for the Bureau of Fisheries and Aquatic Resources (BFAR) Regional Office - 8.


PAUL CORMETA
 (Signature above Printed Name)

PLEASE QUOTE PER: ITEM

ITEM NO.	ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATIONS)	QTY	UNIT OF MEASURE	APPROVED BUDGET OF THE CONTRACT (ABC)	SUPPLIER/CONTRACTOR/CONSULTANT'S PROPOSAL BOX		
					FINANCIAL PROPOSAL (Indicate the Price Offer)		TECHNICAL PROPOSAL (Indicate Brand/Model Offer)
					UNIT PRICE	TOTAL PRICE	
1	Diesel	12	month	42,000.00			
2	Gasoline	12	month	18,000.00			
TOTAL :				60,000.00			

TERMS AND CONDITIONS:

1. That the winning bidder shall provide fuel to BFAR 8- Borongan Tilapia Hatchery authorized representative upon presentment of withdrawal slip stating therein the number of liters to be withdrawn.
2. Volume of fuel to be provided shall follow the prevailing pump price.
3. That the winning bidder shall allow the end user to withdraw fuel upon receipt of Purchase Order.
4. Payment shall be made quarterly upon submission of statement of billing, inspection and acceptance of BFAR authorized representative and papers processed.

GENERAL CONDITIONS:

1. All entries must be legible, preferably typewritten;
2. Bidders must submit eligibility documents indicated in the **CHECKLIST** below;
3. Place this RFQ in a sealed envelope and type the following details on the face of the envelope:
 * Your Company Name * PR Number (Indicated above) * Bid Opening Date & Time
4. Delivery period must be at least within seven (7) calendar days upon receipt of the Notice of Award/ Purchase Order (Indicate days of delivery in the Bidder's Certification Box)
5. Item/s delivered must have warranties for unit replacements, parts, labor or other services;
6. Price offer validity shall be for a period of three (3) months from the Bidder's RFQ date;
7. Quoted prices must be inclusive of taxes, and other charges or fees and shall not exceed the Approved Budget for the Contract (ABC);
8. Transactions with BFAR shall mean compliance by the winning bidder with the bid and delivery requirements before processing of payment;
9. **Failure to comply** with these conditions shall mean **DISQUALIFICATION** of your bid proposal.
10. **Terms of Payment:** At least thirty (30) days upon complete delivery of the items/ services through check or online payment.

CHECKLIST OF DOCUMENTARY REQUIREMENTS	
	Mayor's/Business Permit
	Philgeps Registration No.
	Omnibus Sworn Statement (OSS)
	Income tax return
	NFCC
	PCAB License
	Curriculum Vitae/ Professional License

END-USER: JOVEN O. NORCIO

PLACE OF DELIVERY: _____

DELIVERY PERIOD: _____

Prepared by: cdht

**SUPPLIER/ CONTRACTOR/ CONSULTANT
(BIDDER'S CERTIFICATION BOX)**

Date: _____

After having carefully read and accepted your General Conditions, I/ We quote you on the lot/s and/or item/s at price/s noted above for immediate delivery and shipment which can be made within the delivery period required herein, or as I/We offered below, whichever is preferred by BFAR-8, from receipt of the Notice to Proceed (NTP).

DELIVERY PERIOD: _____ DAYS

 Signature above Printed Name of Authorized Representative

 Position/ Designation

 Company Tel/ Fax/ Mobile No.

 Company Tax Identification No. (TIN)

 PHILGEPS Registration Number