

UNIVERSITY OF THE PHILIPPINES
UP Los Banos
College, Laguna

Request for Quotation
OVCRE National Institute of Molecular Biology and Biotechnology (BIOTECH)

Stamp: **SIGNED**
7-25-17
Signature
DATE

7-245-17-I

06/20/17 (Tue) **AUG 01 2017**
3:40 PM

SUPPLIER'S NAME:

RFQ No.: 727
Fund Code: Trust Fund (184)
N9-024-4B
Mode of Procurement: Shopping (Sec.52.1b)
Evaluation and award: PER LOT BASIS ONLY
Contact Person/ End-user: Severina B. Exconde
Contact No./ Email Add.: 536-2725/ vrgexconde

Please quote your lowest price on the items listed below, subject to the Terms and Conditions on the last page, starting the shortest time of delivery and submit your Quotation duly signed by your representative not later than () in the return Envelope attached herewith.

- Note:
- All entries must be written in print and properly accomplished. Do not leave blank entries. Put N/A for not applicable.
 - Bidders must indicate the BRAND and MODEL NUMBER for equipment and its accessories or peripherals. Evidence shall be in the form of manufacturer's un-amended sales literature, unconditional statements of specification and compliance issued by the manufacturer, samples, independent test data etc., as appropriate.
 - Quotation through fax/email is acceptable. Winning bidder shall submit original signed RQ before issuance of Purchase Order (PO).
 - In order to assure that manufacturing defects shall be corrected by the supplier, a warranty security shall be required from the contract awardee for a minimum period of three (3) months, in the case of Expendable Supplies, or a minimum period of one (1) year, in the case of Non-expendable Supplies, after acceptance by the Procuring Entity of the delivered supplies.
 - Delivery period within _____ calendar days
 - Documentary requirements per Memorandum No. 03, Series of 2017 shall be attached upon submission of the quotation (for new suppliers).
 - Others: _____

RFQ for PR No. 7614

| LOT # | ITEM # | GENERAL NAME OF THE ITEM | REQUIRED SPECIFICATIONS | Qty. | Unit of Issue | Estimated Unit Cost | Estimated Total Cost | OFFERED SPECIFICATIONS Suppliers must state here the detailed technical specifications of their offer against each of the individual parameters of each requirements. | UNIT PRICE | TOTAL COST | EVALUATION (Leave this space blank. For BAC/ Evaluators only) | |
|-------|--------|--|---|------|---------------|---------------------|----------------------|--|------------|------------|--|--|
| | | Airconditioning and Airconditioning System | Split type air conditioning unit, inverter type 2HP. Cooling Capacity:19,438kJ/hr, Energy efficiency ratio 13.9kj/h-w. Power input 1,400watts; power supply: 1/220v/60Hz; Dimension: (indoor unit 1030(w) x 325 (h) x 250 (d) mm/inch Outdoor unit: 870 (w) x 655 (h) x 320 (d) mm/inch, other features: 3M protection filter, complete silencern jet cool. Warranty one (1) year on parts and service. Five years on compressor. Supply Delivery and Installation. Scope of work: A.) Fabricate mounting frame using angulat bar 3/16"x 1 1/2"pre-painted for ACCU B.) Layout/fixing of copper pipe using 1/2" gas and 1/4" liquid line hard drawn type-L. electrical control line stranded wire thhn 3.5 mm ² , main line 5.5 mm ² , circuit breaker 30amps, nema 3R drainage line esion blue pipe 1/2"dia., including Insulation rubber hose 3/4" thickness wall w/ vinyl tape insulation. C.) System flushing, leak testing, vaccuming D.) Refrigerant charging R410A E.) Start up and commissioning F.) Attach Certificate of Warranty | 4 | pc | 60,000.00 | 240,000.00 | | | | | |
| | | | | | | TOTAL ABC: | P240,000.00 | TOTAL AMOUNT: | | | | |
| | | | | | | | | IN WORDS: | | | | |

Reviewed and Checked By:

[Signature]
Engr. DOBAC TWIG D. CAMUS
BAC/PS

Please quote at your government price (including VAT) and state that the time within which you can make delivery. It will be appreciated if we can have your quotation in the office as soon as possible or on or before the deadline stated herein.

[Signature]
Severina B. Exconde
Buyer

TERMS AND CONDITIONS:

- Bidders shall provide correct and accurate information required in this form.
- Price quotation/s must be valid for a period of atleast thirty (30) calendar days from the date of submission.
- Price quotation/s, to be dominated in Philippine Peso shall include all taxes, duties, and for levies payable.
- Quotations exceeding the Approved Budget for the Contract shall be rejected.
- Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and conditions stated herein.
- UPLB reserves the right to reject any or all offers and accept an offer as may be considered most advantageous to the University.
- Any interlineations, erasures, or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.

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

Name of the Company: _____ Tel. No.: _____
 Address: _____ Fax No.: _____
 Name of Representative: _____ Email Address: _____
 Position: _____ Date: _____
 Signature: _____

Requirements for Suppliers (Memorandum No. 03, Series of 2017):

| | Shopping | SVP | Scientific | Lease | Emergency |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1 Mayor's/ Business Permit: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 PhilGEPS Registration Number | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Professional license/ CV (consulting services) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 PCAB License (for Infrastructure) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 Income / Business tax returns (except for government agencies as lessors) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 Omnibus Sworn Statement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 NFCC for Infrastructure with ABC above PhP500k | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |