

UNIVERSITY OF THE PHILIPPINES

LOS BANOS

Los Banos, IV-A VAT Reg. TIN: 000-864-006-00004

Request for Quotation/ Bid Form (Technical Specifications)

TYPE END USER/DEPARTMENT UNIT

BY: DATE: 6 10 24
JUN 2 2 2021-Th
DEADLNE OF SUBMISSION

UPLB-RQ-

DEADLINE OF SUBMISSION:

Suppliers Name:	Date	
	Fund Code:	9304126
	MOP:	SVP
	Contact No:	09215699550
	Contact Person	NESTOR C MANALO

Please quote your lowest price on the item/s listed below, subject to the General Conditions below.

Note

- 1. Bidders shall provide correct and accurate information required in this form. All entries must be typewritten or in print and properly accomplished. Do not leave blank entries, put N/A for not applicable.
- 2. Price quotation/s to be denominated in Philippine Peso shall include all taxes, duties, and/ or levies payable.
- 3. 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 sale literature, unconditional statement of specification and compliance issued by the manufacturer and sample.
- 4. Quotation through fax/email is acceptable. Winning bidder shall submit original signed RQ before issuance of Puchase order (P.O.).
- 5. Quotations exceeding the Appoved Budget for Contract shall be rejected.
- 6. Documentary requirements per Memorandum No. 03 Series of 2017 shall be attached upon submission of the quotation
- 7. Others:

ITEM No.	GENERAL NAME OF THE ITEM	REQUIRED SPECIFICATIONS	UNIT OF MEASURE	QTY	ESTIMATED UNIT APPROVED BUDGET OF THE CONTRACT	ESTIMATED TOTAL APPROVED BUDGET OF THE CONTRACT	OFFERED SPECIFICATION Suppliers must state here the detailed technical specifications of their offer against each of the individual parameters of each requirements	QUOTED UNIT PRICE	TOTAL QUOTED PRICE	EVALUATION (Leave this space blank. For BAC/ Evaluators only)
1.	FERTILIZER	14N-14P-14K Formulation type: pellets Packaging size: 50kg/bag FPA/FDA registered	bag	15	1,500.00	22,500.00				
2.	POTASH FERTILIZER	0N-0P-60K Formulation type: pellets Packaging size: 50kg/bag FPA/FDA registered	bag	10	1,500.00	15,000.00				

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	UREA FERTILIZER	46-0-0 Formulation type: pellets Packaging size: 50kg/bag FPA/FDA registered	bag	20	1,500.00	30,000.00			
	•				TOTAL ABC	67,500.00			
							TOTAL QUOTED AMOUNT IN V	VORDS:	,
F	Please quote at yo	BAC TWG ur government price (including VA quotation in the					make delivery. It will be appre adline stated herein.	ciated if we can	have your
							BUYER/ END-USER		
	S AND CONDITIONS:								
n o	rder to assure that man	alid for a period of at least (30) calendar days ufacturing defects shall be corrected by sup- fone (1) year warranty and two (2) to three	olier, a warr	ranty sec	curity shall be require				
	very period within	calendar days.							
		made to the lowest quotation wich complies v reject any or all offers as may be considered				er terms and conditon	stated herein		
Any	interlineations, erasure	, or overwriting shall be valid only if they are	signed or in	nitiated b	y you or any of your o	duly authorized represe	entative/s.		
qui	rements for Suppliers	s (GPPB Resolution No. 21-2017)							
		REQUIREMENTS	Shops (Section		Negotiated Procurement- Small Value Procurement (Section 53.9)	Negotiated Procurement- Lease of Real Property or Venue (Section 53.10)	Negotiated Procurement- Scientific, Scholarly or Artistic Work, Exclusive Technology and Media Services (Section 53.6)	Negotiated Procurement- Emergency (Section 53.2)	
	Mayor's/Business Per		/	×	/	/	/	1	
	PhilGEPS Registration		/		/	/	/	/	
	Professional license/ PCAB License (for In	CV (consulting services)			1		/		
	CAD LICEISE (IOI III	n dou desar d)		CE III	_ ′				
	Income / Business ta	x returns (except for government agencies			FOR ABO'S ABOVE 500K	/	/	FOR ABO'S ABOVE	

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

Name of the Company:		
Address:	 Tel. No. :	
	 Fax No. :	

FOR ABCS ABOVE 50K FOR ABC'S ABOVE 500K FOR ABC'S ABOVE 50K

6 Omnibus Sworn Statement

7 NFCC for infrastructure with ABC above Ph500k

Signature over Printed Name of Representative:	Email Address	
Position:	Date:	