

## UNIVERSITY OF THE PHILIPPINES LOS BANOS

Los Banos, IV-A

VAT Reg. TIN: 000-864-006-00004

Request for Quotation/ Bid Form (Technical Specifications) END-USER

UPLB BAC SECRETARIAT BY: DATE: 5-13-22

MAY 18 2022 - TIL

UPLB-RO- 5 - 170 - 22 - RES UPLB-RO- OF SUBMISSION

DEADLINE OF SUBMISSION:

| Suppliers Name: | Date                  | April 27, 2022          |
|-----------------|-----------------------|-------------------------|
|                 | Fund Code:            | N829321                 |
|                 | MOP:                  | Small Value Procurement |
|                 | Contact No: 998917501 | 9989175018              |
|                 | Contact Person        | ROSE TONNETH BONDAD     |

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.
- Price quotation/s to be denominated in Philippine Peso shall include all taxes, duties, and/ or levies payable,
   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.).
- Quotations exceeding the Appoved Budget for Contract shall be rejected.
   Documentary requirements per Memorandum No. 03 Series of 2017 shall be attached upon submission of the quotation
- 7. Others:

| ITEM<br>No. | GENERAL<br>NAME OF<br>THE ITEM | REQUIRED SPECIFICATIONS                            | UNIT OF<br>MEASUR<br>E | QTY | ESTIMATED UNIT<br>APPROVED<br>BUDGET OF THE<br>CONTRACT | ESTIMATED<br>TOTAL APPROVED<br>BUDGET OF THE<br>CONTRACT | OFFERED SPECIFICATION Suppliers must state here the detailed technical specifications of their offer against each of the individual parameters of each requirements | QUOTED<br>UNIT<br>PRICE | TOTAL<br>QUOTED<br>PRICE | EVALUATION<br>(Leave this space<br>blank. For BAC/<br>Evaluators only) |
|-------------|--------------------------------|--|------------------------|-----|---|--|---|-------------------------|--------------------------|--|
| 1           |                                | spreader and sticker, 1L/bottle                    | btl                    | 10  | 1,200.00  | 12,000.00  |   |                         |                          |  |
| 2           |                                | Lambdacyhalothrin + Thiamethoxam ,<br>250ml/bottle | btl                    | 5   | 800.00  | 4,000.00   |   |                         |                          |  |
| 3           |                                | Carbendazim + Tebuconazole, 1L/bottle              | btl                    | 8   | 2,000.00  | 16,000.00  |   |                         |                          |  |
| 4           |                                | Spinetoram, 250ml/bottle                           | btl                    | 8   | 1,900.00  | 15,200.00  |   |                         |                          |  |
| 5           |                                | Bacillus amytoliquefasciens, 1L/bottle             | bti                    | 5   | 650.00  | 3,250.00   |   |                         |                          |  |
| 6           |                                | Cyantraniliprole, 250ml/bottle                     | btl                    | 8   | 1,100.00  | 8,800.00   |   |                         |                          |  |
| 7           |                                | Azoxystrobin, 250ml/bottle                         | btí                    | 5   | 1,500.00  | 7,500.00   |   |                         |                          |  |
| 8           |                                | Abamectin, 250ml/bottle                            | btl                    | 10  | 1,420.00  | 14,200.00  |   |                         |                          |  |
| 9           |                                | Chlorothalonil, 250g/pack                          | pck                    | 30  | 400.00  | 12,000.00  |   |                         |                          |  |
| 10          |                                | Imidacloprid + Betacyfluthrin, 100ml/bottle        | btl                    | 10  | 400.00  | 4,000.00   |   |                         |                          |  |
| 11          |                                | Buprofezin, 200g/pack                              | pck                    | 10  | 220.00  | 2,200.00   |   |                         |                          |  |
|             |                                |  |                        |     | TOTAL ABC   | 99,150,00  |   |                         |                          |  |
|             |                                |  |                        |     |   |  | TOTAL QUOTED AMOUNT   | IN WORD                 | S:                       |  |

| Reviewed and Checked By: |        |
|--------------------------|--------|
| CYO SW                   |        |
| PAMELA E. LAPITAN        | 269-22 |
| BAC TWG                  |        |

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 on or before the deadline stated herein.

> CELIA dR. MEDINA BUYER/ END-USER

## TERMS AND CONDITIONS:

- 1. Price quotation/s shall be valid for a period of at least (30) calendar days from the date of submission.
- 2. In order to assure that manufacturing defects shall be corrected by 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 of one (1) year warranty and two (2) to three (3) years extended warranty (if applicable) in the case of NON-EXPENDABLE SUPPLIES after acceptance by End-user of the delivered supplies.
- 3. Delivery period within calendar days,
- A. Award of contract shall be made to the lowest quotation wich complies with the technical specifications, and other terms and condition stated herein
   UPLB reserves the right to reject any or all offers as may be considered most advantageous to the University,
- 6. Any interlineations, erasure, or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.

| REQUIREMENTS   | Shopping<br>(Section 52) | Negotiated<br>Procurement-<br>Small Value<br>Procurement<br>(Section 53.9) | Negotiated<br>Procurement-<br>Lease of Real<br>Property or Venue<br>(Section 53,10) | Negotiated Procurement-<br>Scientific, Scholarly or Artistic<br>Work, Exclusive Technology<br>and Media Services (Section<br>53.6) | Negotiate<br>d<br>Procurem<br>ent- |
|--|--------------------------|--|---|--|------------------------------------|
| Mayor's/Business Permit  | 1                        | /  | (000001133,10)  | 33.0)  | Emergenc                           |
| PhilGEPS Registration Number   | 1                        | 1  | ,   | ,  | 1                                  |
| Professional license/ CV (consulting services)                           | Shire Salares            | + ,  |   | ,  | /                                  |
| PCAB License (for Infrastructure)  |                          | 1  |   |  |                                    |
| Income / Business tax returns (except for government agencies as lessor) |                          | FOR ABC'S ABOVE<br>500K  | /   | /  | FOR ABC'S<br>ABOVE 50K             |
| 6 Omnibus Sworn Statement  |                          | FOR ABC'S ABOVE<br>50K   |   |  | FOR ABC'S<br>ABOVE                 |
| 7 NFCC for Infrastructure with ABC above Ph500k                          |                          | ,  |   |  | FOR ABC'S                          |

| After having carefully read and accepted your General Conditions, I/We quote your of the Company: | you on the Item at prices noted above. |  |
|---|--|--|
| Address: Revised 6 June 2018/ JOINT BAC RESOLUTION NO. R-006-18                                   | Tel. No. :                             |  |

|                                   | Fax No.:       |  |
|-----------------------------------|----------------|--|
| Signature over<br>Printed Name of | Email Address: |  |
| Position:                         | Date:          |  |
|                                   |                |  |