



UNIVERSITY OF THE PHILIPPINES

LOS BANOS

Los Banos, IV-A

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

Request for Quotation/ Bid Form (Technical Specifications)
INSTITUTE OF MATHEMATICAL SCIENCES AND PHYSICS (IMSP)

UPLB BAC SECRETARIAT
BY: [Signature] DATE: 3-10-23
MAR 14 2023 6pm
UPLB-RQ- 3-85-23-RES
DEADLINE OF SUBMISSION
UPLB-RQ-

DEADLINE OF SUBMISSION:

Suppliers Name:

Date: March 06, 2023
Fund Code: N8-320-23
MOP: Shopping
Contact No: 9953923970
Contact Person: Joshua Castro

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 Purchase order (P.O.).
5. Quotations exceeding the Approved 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:

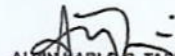
Table with 10 columns: ITEM No., GENERAL NAME OF THE ITEM, REQUIRED SPECIFICATIONS, UNIT OF MEASURE, QTY, ESTIMATED UNIT APPROVED BUDGET OF THE CONTRACT, ESTIMATED TOTAL APPROVED BUDGET OF THE CONTRACT, OFFERED SPECIFICATION, QUOTE D UNIT PRICE, TOTAL QUOTED PRICE, EVALUATION. Rows include items like Longpass Dichroic Mirror, Neutral Density Filter, Convex Lens, Fluorescence Filter, Mirror Mount, Filter Mount, Stainless Steel Optical Post, Post Holder, and Stainless Steel Cap Screw.

TOTAL QUOTED AMOUNT IN WORDS:

Reviewed and Checked By:

  
**Mark Anthony Badua**  
 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.

  
**ALVIN HARLO G. TAPIA, DSc**  
 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 in the case of NON-EXPENDABLE SUPPLIES after acceptance by End-user of the delivered supplies.
3. Delivery period within 30 calendar days.
4. Award of contract shall be made to the lowest quotation which complies with the technical specifications, and other terms and condition stated herein
5. 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 initialed by you or any of your duly authorized representatives.

**Requirements for Suppliers (GPPB Resolution No. 21-2017)**

	REQUIREMENTS	Shopping (Section 52)	Negotiated	Negotiated	Negotiated	Negotiated
1	Mayor's/Business Permit	/	/	/	/	Negotiated Procurement
2	PhIGEPS Registration Number	/	/	/	/	/
3	Professional license/ CV (consulting services)	/	/	/	/	/
4	PCAB License (for Infrastructure)	/	(Section 53.9)	53.10	/	/
5	Income / Business tax returns (except for government agencies as lessor)	/	/	/	Services (Section 53.6)	53.21
6	Omnibus Sworn Statement	/	FOR AGENCIES ABOVE	/	/	FOR AGENCIES ABOVE
7	NFCC for Infrastructure with ABC above Ph500k	/	FOR AGENCIES ABOVE	/	/	FOR AGENCIES 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:

Signature over Printed Name of Representative:

Tel. No. : \_\_\_\_\_  
 Fax No. : \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Date: \_\_\_\_\_