DEADLNE OF SUBMISSION

### **UNIVERSITY OF THE PHILIPPINES** LOS BANOS Los Banos, IV-A VAT Reg. TIN: 000-864-006-00004

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# Request for Quotation/ Bid Form (Technical Specifications) BIOTECH-OVCAA-UPLB

Suppliere No

Note:

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	Contact r erson	JA Anarna/GL Plata	
	Contact Person	IA AnomalCL Dista	
	Contact No:	09153150623/09271720920	
	MOP:	SVP	
	Fund Code:	88B6347	
Suppliers Name:	Date	May 2023	

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

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
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,
Quotation through fax/email is acceptable. Winning bidder shall submit original signed RQ before issuance of Puchase order (P.O.).
Dotations exceeding the Appoved Budget for Contract shall be rejected.
Dotate:

ITEM No.	GENERAL NAME OF THE ITEM	REQUIRED SPECIFICATIONS		YTO	ESTIMATED UNIT APPROVED MUDGET OF THE CONTRACT		OFFERED OPECIFICATION Buildian dual data the test the datalist technical episitications of their other operations source the induitions parameters of each residirentees	QUOTED UNIT PRICE	TOTAL QUOTED PRICE	EVALUATION (Lesve this space blank. For BAC/ Evaluators only)
		AUTOCLAVABLE PLASTIC, 14x20				-				
1	Plastic Products	100pcs/pack,	pck	50	300.00	15,000.00				
		Thickness: 00.2mm				-				
2	Plastic Products	AUTOCLAVABLE PLASTIC, 5x8, 100pcs/pack,	pck	4,000	35.00	140,000.00				
		Thickness: 00.2mm								
3		PLASTIC CONTAINER/DRUM with cover approx: 200 liters	рс	5	1,100.00	5,500.00				
						-				
						-				
					TOTAL ABC	160,500.00				
	Reviewed and Ch	and a D					TOTAL QUOTED AMOUNT IN WOR	RDS:		

iewed and Checked By: room -

PAMELA E. LAPITAN 282-23

BAC TWG

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 GERALDNEL. PLATA

# BUYER/ END-USER

## TERMS AND CONDITIONS:

Price quotation/s shall be valid for a period of at least (30) calendar days from the date of submission.
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
Delivery period within \_\_\_\_\_\_ calendar days.

Award of contract shall be made to the lowest quotation wich complies with the technical specifications, and other terms and conditon stated herein
UPLB reserves the right to reject any or all offers as may be considered most advantaceous to the University.
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 for Suppliers (GPPB Resolution No. 21-2017)

	REQUIREMENTS	Shopping (Section 52)	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)
1	Mayor's/Business Permit	/	/	1		
2	PhilGEPS Registration Number	1	/	/	/	/
3	Professional license/ CV (consulting services)		,	/	/	/
4	PCAB License (for Infrastructure)	A CONTRACTOR OF	/		/	
5	Income / Business tax returns (except for government		FOR ABO'S ABOVE	/	/	FOR ABC'S
6	Omnibus Sworn Statement		FOR ABO'S ABOVE	Contraction of the second		ABOVE 50K
7	NFCC for Infrastructure with ABC above Ph500k		/			ABOVE SOOK FOR ABC'S

#### 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			
, laar 665.	Tel. No. :		
Signature over Printed	Fax No. :		
Position:	Email Address:		
POSITION.	 Date:		