

## UNIVERSITY OF THE PHILIPPINES LOS BANOS

Los Banos, IV-A
VAT Reg. TIN: 000-864-006-00004
Request for Quotation/ Bid Form (Technical Specifications) CFNR Makiling Center for Mountain Ecosytems(MCME)

UPLB BAC SECRETARIAT BY: DATE: 10/4/24

OCT 0 8 2024 Ogm UPLB-RQ- 10-361-24-60035 DEADLNE OF SUBMISSION

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DEADLINE OF SUBMISSION:

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Suppliers Name:	Date	October 03, 2024	
	Fund Code:	9311222	
	MOP:	Small Value Procurement	
	Contact No:	536-2577	
	Contact Person	Mickiee C. Oracion	

Please quote your lowest price on the item/s listed below, subject to the General Conditions below. [6]095

- 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)
and	Vehicle Repair and Maintenance	Supply of Labor and Materials for the Repair/Preventive Maintenance Service of MCME Service Vehicle Isuzu DMax with Plate No.: 040110. Scope of Work: -Perform 160,000km PMS -Generate Health Report -Pull-out 4 Wheels/Repack Front Hub Bearings -Change All Fluids and Filters -Change Coolant -Replace Alternator and A/C Belts -Replace Enginer Battery -Complete Wash	lot	1	40,000.00	40,000.00				
		Spare Parts / Materials to be Supplied: 2 Gal Multi-Z Oil 1 Pc Oil Filter 1 Pc Fuel Filter 1 Pc Air Filter 1 Pc Drain Washer 3 L Transmission Oil 3 L Gear Oil 1 Pc Brake Fluid 1 Pc Clutch Fluid 1 L ATF 8 L Radiator Coolant 2 Pc Brake Cleaner 1 Pc Sand paper 1 Pc Grease 1 Pc Sanitation 1 Pc Silicon Gasket 1 Pc Engine Flushing 1 Pc A/C Belt 1 Pc Engine Battery								
		Warranty: At least 1-Year warranty on Engine Battery; at least 1-month warranty for other Parts & Materials and Labor Supplied.								

2	Vehicle Repair and Maintenance	Supply of Labor and Materials for the Repair and Preventive Maintenance Service of MCME Vehicle (Ford Ranger with MV File No.: 1312-0000369422.)  Spare Parts / Materials to be Supplied: 1. 2 Gal Engine Oil 2. 1 Nr Oil Filter 3. 1 Nr Fuel Filter 4. 1 Nr Air Filter 5. 1 Set Brake Pad (Front) 6. 1 Set Brake Pad (Front) 6. 1 Set Brake Shoes (Rear) 7. 1 Nr Rotor Disc Refacing (Left Only) 8. 1 Set Stabilizer Link 9. 1 Set Stabilizer Link 9. 1 Set Stabilizer Link 9. 1 Set Suspension Bushing (Upper) 10. 1 Set Ball Joint (Upper) 12. 1 Set Ball Joint (Upper) 13. 1 Nr Engine Support 14. 1 Can Brake Cleaner 15. 1 Can WD-40 16. 1 Can Grease 17. Labor Cost Warranty: At least 1-month warranty for the Parts, Materials and Labor Supplied.	lot	1	40,000.00	40,000.00			
		TOTAL ABC				80,000.00			
		TOTAL ABO					TOTAL QUOTED AMOUNT IN V	VORDS:	
		.10							
	Reviewed and Ched	iked By	-					NACONAL PROPERTY OF THE PARTY O	
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Please quote at your government price (including VAT) and state that the time within which you can make delivery. In will be appreciated if we can have your quotation

in the office as soon as possible on or before the deadline stated herein.

کسو ORACION 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 14 calendar days.

- 4. Award of contract shall be made to the lowest quotation wich complies with the technical specifications, and other terms and conditon 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 initiated by you or any of your duly authorized representative/s.

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

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	REQUIREMENTS	Shopping (Section 52)	Negotiated Procurement-	Negotiated Procurement-	Negotiated Procurement- Scientific, Scholarly or Artistic Work, Exclusive	Negotiated Procurement-
		(000001102)	Small Value	Lease of Real	Technology and Media Services	Emergency
			Procurement (Section 53.9)	Property or Venue (Section 53.10)	(Section 53.6)	(Section 53.2)
1	Mayor's/Business Permit	/	/	/	/	/
2	PhilGEPS Registration Number	/	/	/	/	/
3	Professional license/ CV (consulting services)		1 /		/	
4	PCAB License (for Infrastructure)		/			
	Income / Business tax returns (except for government agencies as lessor)		FOR ABC'S ABOVE 500K	/	/	FOR ABC'S ABOVE 50K
	Omnibus Sworn Statement		FOR ABC'S ABOVE 50K			FOR ABC'S ABOVE 500K
7	NFCC for Infrastructure with ABC above Ph500k		/			FOR ABC'S ABOVE 50K

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