|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | Date | : | «date» |
|  |  |  |  | RFQ No. | : | «rfqno» |

**REQUEST FOR QUOTATION**

(FOR GOODS AND SERVICES)

Mode of Procurement: Negotiated Procurement = Small Value Procurement (Section 53.9, 2016 IRR of RA 9184)

|  |  |  |
| --- | --- | --- |
| «company» |  | «company-address» |
| Name of Company |  | Address |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Contact No. | : | «company-telephone» |  | PHILGEPS Ref. No. | : | «philgeps» |
| PR No. | : | «prno» |  | Requested by | : |  |

Please quote your lowest price on the project/s specified below. Submit your quotation enclosed in a sealed envelope not later than «notlaterthan» at «at».

|  |  |
| --- | --- |
|  | «signatory» |
|  | «title» |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ITEM NO. | QTY | UOM | PARTICULARS/DESCRIPTION AND SPECIFICATIONS | APPROVED UNIT COST | BRAND NAME | UNIT PRICE |
|  |  |  |  |  |  |  |

NOTE :

1. FOR FIRST-TIME SUPPLIER/CONTRACTOR, PLEASE SUBMIT THE FOLLOWING: (1) MAYOR’S/BUSINESS PERMIT, (2) PHILGEPS REGISTRATION CERTIFICATE, (3) INCOME/BUSINESS TAX RETURN, AND (4) OMNIBUS SWORN STATEMENT (ANNEX H – APPENDIX A, 2016 IRR OF RA 9184).
2. DELIVERY PERIOD WITHIN TEN (10) CALENDAR DAYS FOR COMMON OFFICE SUPPLIES AND TWENTY (20) CALENDAR DAYS FOR OFFICE AND ICT EQUIPMENT UPON RECEIPT OF PURCHASE ORDER.
3. PRICE VALIDITY SHALL BE FOR A PERIOD OF THIRTY (30) CALENDAR DAYS.
4. BIDDERS SHALL SUBMIT ORIGINAL BROCHURES OR LITERATURE SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED (IF APPLICABLE).
5. PAYMENT IS THROUGH LAND BANK OF THE PHILIPPINES. SUPPLIER MUST PROVIDE ITS BANK ACCOUNT NUMBER.
6. BUKIDNON STATE UNIVERSITY RESERVES THE RIGHT TO ACCEPT OR REJECT ANY OR ALL BIDS / PRICE QUOTATIONS TO ANNUL THE PROCESS AND TO REJECT ALL BIDS AT ANY TIME PRIOR TO CONTRACT OF AWARD WITHOUT THEREBY INCURRING ANY LIABILITY TO THE AFFECTED BIDDER OR BIDDERS.

After having carefully read and accepted your General Conditions, we quote on the item/s at price/s specified above.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Printed Name & Signature of Proprietor / Representative |  | Date |

|  |  |
| --- | --- |
| Canvassed by: | «canvasser» |
|  | Printed Name & Signature |