## Department of Agriculture AGRICULTURAL TRAINING INSTITUTE

## **REGIONAL-TRAINING CENTER-VII CENTRAL VISAYAS**

Beside City Park, Cabawan District, Tagbilaran City Mobile No: 09173218524

> Email add: ati7.philgeps@gmail.com REQUEST FOR QUOTATION

	Date: RFQ No.
Name of Company: Address:	
Business Permit No:	Tin No: VAT Non-VAT
Please quote your lowest offer for the item/s described below, subject by you or your representative.	ct to the General Conditions stated below, and submit your quotation duly signed
General Conditions:	
1 PRICES SHOULD BE INCLUSIVE OF VAT.	
2 PRICE VALIDITY SHALL BE FOR A PERIOD OF 60 CA PLEASE ATTACH TOGETHER WITH YOUR QUOTATI I. SHOPPING	
-MAYOR'S/BUSINESS PERMIT  II. SMALL VALUE PROCUREMENT	-PHILGEPS REG. NUMBER (for 50k & above, if registered)
<ul> <li>3 -MAYOR'S/BUSINESS PERMIT</li> <li>-OMNIBUS SWORN STATEMENT (for ABCs above 50k)</li> <li>-PROFESSIONAL LICENSE/CV (for Consulting Services)</li> <li>-FOR COOPERATIVE (Certificate of Compliance, Menu)</li> </ul>	-PCAB (for infrastructure)
REFERENCE GPPB RES. NO. 21-2017 DATED 30 MAY 2017 4 MANAGEMENT RESERVES THE RIGHT TO REJECT (	OUTRIGHT ANY CONTINGENT BIDS.
5 BID PRICES SHOULD BE VALID 45 DAYS FROM THE	E DATE OF QUOTATION
	MA. GRACIA SOLIVA-PUNGAY
	BAC Chairman

After having carefully read and accepted the General Conditions, I/we submit our quotation/s for the item/s as follows:

ITEM NO.	QTY.	UNIT	ITEM AND DESCRIPTION	UNIT PRICE	Total
			Day 0		
	3	pax	Food (3 meals and 2 snacks) with accommodation		
			Day 1-2		
	40	pax	Food (3 meals and 2 snacks) with accommodation and venue		
			Day 3		
	40	pax	Food (3 meals and 2 snacks) with venue		
			Preferences:		
			-Full board meals with		
			Appetizer		
			At least 3 main dishes		
			Dessert/Fruits		
			with free flowing coffee/tea		
			-Supplier should include the Menu together with the quotation		
			TOTAL:		
PURPOSE: For the Managing Our Desires Future: Workshop on the Crafting of the Agriuclture and Fishery Modernization Pl (AFMPs) for LGU Siquijor on June 19-21,2024.				Agriuclture and Fishery Modernization Plans	

Printed Name /Signature		
(Supplier/Dealer)		
Telephone No. / Cellphone No. / E-		

mail Address