## 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:		Non-VAT
Please quote your lowest offer by you or your representative.	for the item/s described below, subject t	to the General Conditions st	ated below, a	nd submit your quotation duly signed
General Conditions:				
1 PRICES SHC	OULD BE INCLUSIVE OF VAT.			
2 PRICE VALI	DITY SHALL BE FOR A PERIOD OF 60 CALE	NDAR DAYS		
PLEASE ATT I. SHOPPIN	ACH TOGETHER WITH YOUR QUOTATIO	N A COPY OF THE FOLLOWI	NG:	
-MAYOR'S	ס /BUSINESS PERMIT ALUE PROCUREMENT	-PHILGEPS REG. NUMBER (fo	r 50k & above,	if registered)
3 -MAYOR'S/	BUSINESS PERMIT	-PHILGEPS REG. NUMBER (fo	r 50k & above.	if registered)
5	SWORN STATEMENT (for ABCs above 50k)	-ITR (for ABC above 500K)	,	
-PROFESSIC	NAL LICENSE/CV (for Consulting Services) RATIVE (Certificate of Compliance, Menu)	-PCAB (for infrastructure)		
REFERENCE GPPB I	RES. NO. 21-2017 DATED 30 MAY 2017			
4 MANAGEM	ENT RESERVES THE RIGHT TO REJECT OU	JTRIGHT ANY CONTINGENT	BIDS.	

5 BID PRICES SHOULD BE VALID 45 DAYS FROM THE 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
	35	рах	Food (full board) for 3 days with accommodation		
	3	days	Venue rental		
			TOTAL:		-
<b>PURPOSE:</b> For the Safer Food, Better Health: A Food Safety & Market Regulations Training on August 6-8, 2024 at Cebu			raining on August 6-8, 2024 at Cebu City.		

Printed Name /Signature (Supplier/Dealer)

Telephone No. / Cellphone No. / Email Address