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	Tin No:		Non-VAT					
Please quote your lowest offer for the item/s described below, subject to the General Conditions stated below, and submit your quotation duly signed									
by you or your represe	entative.								
General Conditions:									
1 PR	RICES SHOULD BE INCLUSIVE OF VAT.	HOULD BE INCLUSIVE OF VAT.							
	E VALIDITY SHALL BE FOR A PERIOD OF 60 CALENDAR DAYS SE ATTACH TOGETHER WITH YOUR QUOTATION A COPY OF THE FOLLOWING:								
1. 9	SHOPPING								
-	MAYOR'S/BUSINESS PERMIT	-PHILGEPS REG. NUMBER (fo	r 50k & above,	if registered)					
II.	SMALL VALUE PROCUREMENT								
3 -	MAYOR'S/BUSINESS PERMIT	3USINESS PERMIT -PHILGEPS REG. NUMBER (for 50k & ab							
-(OMNIBUS SWORN STATEMENT (for ABCs above 50k)	-ITR (for ABC above 500K)							
-F	PROFESSIONAL LICENSE/CV (for Consulting Services)	-PCAB (for infrastructure)							
-F	OR COOPERATIVE (Certificate of Compliance, Menu)								
	ERENCE GPPB RES. NO. 21-2017 DATED 30 MAY 2017		DID.C						
		AENT RESERVES THE RIGHT TO REJECT OUTRIGHT ANY CONTINGENT BIDS.							
5 BI	D PRICES SHOULD BE VALID 45 DAYS FROM THE D	S SHOULD BE VALID 45 DAYS FROM THE DATE OF QUOTATION							

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	
	25	рах	Food (3 meals and 2 snacks) for 3 days			
			TOTAL:			
PUR	PURPOSE: For the Knowledge based Management Training Level 3 on July 31-August 2, 2024 at Bohol.					

Printed Name /Signature (Supplier/Dealer)

MA. GRACIA SOLIVA-PUNGAY BAC Chairman

Telephone No. / Cellphone No. / Email Address