



Republic of the Philippines Department of Agriculture AGRICULTURAL TRAINING INSTITUTE

ATI Building, Elliptical Road, Diliman, Quezon City, Metro Manila 1100 Tel. Nos. (63-2) 8929-8541 to 49 & 8928-7397 | Fax No. (63-2) 8920-9792 Email: director@ati.da.gov.ph | www.e-extension.gov.ph

REQUEST FOR QUOTATION

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DATE.	1 -
DATE:	1:
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1/11/2024

PURCHASE REQUEST NO.: ADMIN (GH) FUND 2024-11-177

CANVASS NO. 138

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Please quote your lowest price, taxes included, and subject to the ter	rms and conditions that you may	y encounter
purposely for article (s) and/or service(s) enumerated below, statin	g the shortest time of delivery	and submit your
quotation duly signed by your representative not later than	in the return envelope attache	d here with.

Very truly yours:

MILAGROS C. URBANO

BAC	Chairman

ITEM NO.	QTY	UNIT	ITEM AND DESCRIPTION	UNIT PRICE	TOTAL
	15 75 30 5 135 15	sq.m sq.m l.m l.m sq.m sq.m	SUPPLY OF LABOR AND MATERIALS OF REPAIR WORKS AT MESS HALL BUILDING Repair the ceiling due to the water leak coming from the damage roofing of the training hall at 2nd floor Replace the damaged roofing sheet Replace the damaged roofing ridges Repair the damaged gutter Re-apply of 2 coat of waterproofing on concrete deck and concrete parapet at the roof Repair the flooring of the veranda at the 2nd floor to prevent the water leak and repair the ceiling at the cafeteria due to the water leak Replace the door jamb infested of termite at the conference room at the cafeteria		
PURPOSE: To repair the problem on the water leaks and the damaged areas in the Mess Hall Building.					
Pls. submit the following eligibility documents:					
Number	Number and Bank Details				

I hereby certify that I am in the position to furnish the above article(s), service(s) at the prices and in quantities as called for except as I have indicated. The articles are available in our stock for immediate delivery to the Agricultural Training Institute, Elliptical Road, Diliman, Quezon City

MODEL:	
DELIVERY PERIOD:	
WARRANTY PERIOD:	
PRICE VALIDITY:	Signature Over printed name of proprietor/Manager
	or Authorized Representative
CANVASSED BY:	
DATE:	