

REQUEST FOR QUOTATION

For: IMPROVEMENT OF H.E BUILDING AT DAGATAN ES, CAVITE

Name of Company

Date: November 22, 2017

RFQ No.: gleyva-B-11-37-2017

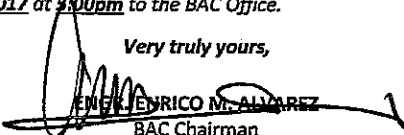
Complete Company Address

PR No.: 2017-8-F-339

PHILGEPS Ref. No.: 4984566

To whom it may concern:

Please quote your lowest price/s on the lot or item/s below, subject to General Conditions indicated herein, stating the shortest time of delivery and submit your quotation duly signed by your official representative not later than **December 05, 2017 at 5:00pm** to the BAC Office.

Very truly yours,

ENENG ENRICO M. ALVAREZ
BAC Chairman

CANVASSERS'S CERTIFICATION

This is to certify that I have full knowledge, authority and responsibility in distributing and/or collecting the Request for Quotation in accordance to the guidelines in securing prices for the Provincial Government of Cavite.

(Printed Name above Signature)
AUTHORIZED CANVASSER

PLEASE QUOTE: **PER LOT**

BIDDER'S PROPOSAL BOX

| No | ITEM DESCRIPTION \ (ITEM NAME&TECHNICALSPECIFICATIONS) | QTY. | UNIT | APPROVED BUDGET OF CONTRACT (ABC) | FINANCIAL PROPOSAL (Indicate the Price Offer) | | TECHNICAL PROPOSAL | Delivery weeks /days |
|----|---|------|------|-----------------------------------|---|-------------|--------------------|----------------------|
| | | | | | Unit Price | Total Price | | |
| 1 | Improvement of H.E Building at Dagatan ES, Amadeo, Cavite | | | 288,000.00 | | | | |
| | *see Attached Bill of Quantities | | | | | | | |
| | TOTAL | | | | | | | |

- GENERAL CONDITIONS**
1. All entries must be legible;
 2. Bidders must submit necessary business permits(SEC, LGU, DTI, CDA, BIR Certificate, etc.);
 3. Place this RFQ in a sealed envelope and type the following details on the face of the envelope:
Your Company Name
RFQ No:-
PR No.
PHILGEPS Reference No.
 4. Delivery period must be at least within _____ calendar days from date of the Notice to Proceed (Indicate the days of delivery in the Bidder's Proposal box)
 5. Item/s delivered must have warranties for unit replacements, parts, labor or other services;
 6. Price validity shall be for a period of three(3) months;
 7. Quoted prices must be inclusive of taxes, and other charges or fees and shall not exceed the Approved Budget for the Contract(ABC);
 8. If Bid is accepted, the supplier undertakes to provide a performance security in the form, amounts, and within the times specified in the Revised IRR of R.A. 9184;
 9. It is understood that the Provincial Government of Cavite is not bound to accept the Lowest Calculated Bid or any Bid it may receive.
 10. Transaction with the Provincial Government of Cavite shall mean compliance by the winning bidder with the bid and delivery requirements before the issuance of check payment;
 11. Failure to comply with these conditions shall mean disqualification of your bid proposal

SUPPLIER/CONTRACTOR/CONSULTANTS CERTIFICATION

Date: December 05, 2017

After having carefully read and accepted Your General Conditions, I/We quote you on the item/s at price/s noted above for immediate delivery and shipment which can be made in _____ days from receipt of the Notice To Proceed.

Print Name & Signature of Authorized Representative

Company Tel./Fax/Mobile No.

Company Tax Identification No. (TIN)

Please attached:
COR- Certificate of Registration (BIR)

PLEASE QUOTE: PER LOT

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| No | ITEM DESCRIPTION (ITEM NAME & TECHNICAL SPECIFICATIONS) | UNIT | QTY. | APPROVED BUDGET OF CONTRACT (ABC) | FINANCIAL PROPOSAL <i>(Indicate the Price Offer)</i> | | TECHNICAL PROPOSAL | Delivery weeks /days |
|-----|--|-------|--------|-----------------------------------|--|-------------|--------------------|----------------------|
| | | | | | Unit Price | Total Price | | |
| I | Tarpaulin w/ Frame | l.s | 1.00 | | | | | |
| II | Tile Works | sq.m. | 144.00 | | | | | |
| III | Painting Works | | | | | | | |
| A | Concrete & Masonry | sq.m. | 292.80 | | | | | |
| B | Ceiling | sq.m. | 196.32 | | | | | |
| C | Roofing | sq.m. | 432.00 | | | | | |
| IV | Tarpaulin w/ Frame | l.s | 1.00 | | | | | |
| | ***nothing follows*** | | | | | | | |
| | TOTAL | | | 288,000.00 | | | | |

Company Name.

Address

*Print Name & Signature of
Authorized Representative*