

Ja	nuary 30, 2023	
	Data	

4:00 PM

February 2, 2023

REQUEST FOR QUOTATION SMALL VALUE PROCUREMENT

INSTRUCTION:

- Bidders are required to read the instructions and fill all the blanks properly, Prospective Bidders/Suppliers
 are required to use this official canvass form in accomplishing their bid proposals/quotation.
- 2. Any specifications other than those required/stated in this form shall not be considered in their evaluation of bid.
- 3. Quotation must be the lowest price(s), taxes included for the item(s) services listed hereunder including delivery charges.
- 4. Always indicate the brand name of the offered items (s) or product.

DEADLINE FOR SUBMISSION OF BIDS

- 5. Price quotation(s) submitted shall be valid for ONE HUNDRED TWENTY DAYS (120) days reckoned from the deadline for submission of quotations.
- 6. Terms of payment-Thirty (30) days from delivery of items(s)
- 7. Only sealed quotations shall be considered by BAC. The Bidders/Suppliers or Authorized Representative shall indicate on the envelope the RFQ Number and the company name of the bidder/supplier.
- 8. Awarding shall be done by LOT /CATEGORY only.
- 9. Delivery and/or Installation Period: 15 calendar days upon receipt of Notice to Proceed

	ACE 2022				Data		Time a	
PR No.	ASF 2023- 01-016	End-user:	JANICE S. GARCIA, DVM	ABC: 350,000.00	Date		Time	
Qty.	Unit	End-user.	Item/Description	ABC. 330,000.00	ABC (PhP)	Offered	Unit price	Total cost
		Disimfortant Davidan 400	<u> </u>			brand		
1000	sachet	Disinfectant Powder, 100	g/sacnet, 100 pcs/box		350,000.00			
		Specification:						
		Peroxygen based disi	nfectant					
		50% Potassium						
		Monopersulfate						
		Non-corrosive						
		Non-irritating, non-toxic and not harmful to the user User-friendly						
			years from date of delivery					
		Note:						
		Delivery period: 15 calenda	ar days					
		Place of delivery: BAI Com	pound					
	LOLITA	M. JUMALON			RENE	C. SANTIA	AGO, DVM, M	Sc.
	G-E	PS Posted			Chair, Bids and Awards Committee			
	certify that I		CANVASSER'S CER ity and responsibility in distributing and/or collection		in accordance to th	ne guideline	s in securing p	orices for
the bare	au oi Ailinai	maasi y.	(Signature Over Pri	nted Name)				
			Authorized Car					
The BAI	Bids and Aw	ards Committee (BAC)						
		nan, Quezon City						
•		·						
Sir/Mada	am:							
			submit our quotation indicated above. I/We ha			m requireme	ents and agree	to furnish
			submit our quotation indicated above. I/We had ons any or all said articles/services described a			m requireme	ents and agree	e to furnish
						m requireme	ents and agree	e to furnish
and/or e	ffect delivery	in conformity with specificati		bove from receipt of Purchase		m requireme		
and/or e		in conformity with specificati				m requireme	ents and agree	
and/or e	ffect delivery	in conformity with specificati		bove from receipt of Purchase		n requireme	Tax Identifica	ation Number
and/or e	ffect delivery re Over Printe	in conformity with specificati		bove from receipt of Purchase		m requireme	Tax Identifica	ation Number
and/or e	ffect delivery re Over Printe	in conformity with specificati		bove from receipt of Purchase Name of Company		m requireme	Tax Identifica	ation Number
and/or e	ffect delivery e Over Printe Telepho	in conformity with specificati	ons any or all said articles/services described a	bove from receipt of Purchase Name of Company		m requireme	Tax Identifica	ation Number
Signatur	ffect delivery e Over Printe Telepho	in conformity with specification of Name The Number(s) The Report of Submission in Conformity with specification of the Number (s)	ons any or all said articles/services described a	bove from receipt of Purchase Name of Company		m requireme	Tax Identifica	ation Number
Signatur Manda	re Over Printe Telepho Itory Requires	in conformity with specification of Name The Number(s) The Report of Submission in Conformity with specification of the Number (s)	ons any or all said articles/services described a ———————————————————————————————————	Name of Company Address rn (for ABCs above P500k) Statement (For ABCs above P5	Order. OK) (Unnotarized C	OSS may	Tax Identifica	ation Number
Signatur Manda	re Over Printe Telepho Itory Requires	in conformity with specification of Name In Name In Number(s) Irements for submission (Updated)	ons any or all said articles/services described a ———————————————————————————————————	Name of Company Address rn (for ABCs above P500k)	Order. OK) (Unnotarized C	OSS may	Tax Identifica	ation Number

Rev. No.: 03 Nov. 15, 2021