ADMIN-BAC FORM 14
Rev. 2, January 1, 2024

Standard Form Number: **SF-GOOD-60**
Revised on May 24, 2004

Republic of the Philippines
Government of Ormoc City
BIDS AND AWARDS COMMITTEE
Ormoc City

CHD

P.R. No.: ***240988***
Quotation No.: ***243453-2017***
PhilGEPs No.:

Standard Form Title:

REQUEST FOR QUOTATION

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by you or your authorized representative not later than _____ _____.

LOUCELLE MAE B. ARANETA
PROCUREMENT OFFICER

NOTE: **(1)** ALL ENTRIES MUST BE TYPEWRITTEN OR LEGIBLY WRITTEN. (2) DELIVERY PERIOD WITHIN 30 C.D. UPON RECEIPT OF THE APPROVED FUNDED PURCHASE ORDER (P.O.). Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be for a minimum for non-delivery without valid reason. **(3)** WARRANTY SHALL BE FOR A PERIOD OF THREE (3) MONTHS OF SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE END-USER. **(4)** PRICE VALIDITY SHALL BE FOR A PERIOD OF SIXTY (60) DAYS. (5) G-EPS REG NO., MAYORs PERMIT, DTI/SEC, AND FOR ABC's ABOVE 500K - ITR & OMNIBUS SWORN STATEMENT SHALL BE ATTACHED UPON SUBMISSION **(6)** BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCTS IF APPLICABLE. **(7)** THE ***APPROVED BUDGET CEILING*** FOR THIS PROCUREMENT IS (amount indicated below)

Php ***580,000.00***

	Activities	*Schedule*	
		FROM	*TO*
1	Issuance of Canvass	***Monday March 25, 2024***	***Monday April 01, 2024***
2	Submission of Canvass	***Tuesday April 02, 2024***	***10:00 AM***
3	Opening of Canvass	***Tuesday April 02, 2024***	***2:00 PM***

#	*Item and Description*	*QTY*	*UNIT COST*	*TOTAL*
1	*PERMETHRIN+S-BIOALLETHRIN+PIPERONYL BUTOXIDE*	*40 ltr*		
	Active Ingredients:			
	S-BIOALLETHRIN 16.8% w/w			
	PERMETHRIN (25/75) 18.7% w/w			
	PIPERONYL BUTOXIDE 16.8% w/w			
2	*S-BIOALLETHRIN 7.5g/L + DELTAMETHRIN 5.0g/L*	*40 ltr*		
3	*CYPERMETHRIN*	*10 btl*		
	1litre			
	Active Constituent:			
	Cypermethrin 25g/L			
	-x-x-x-x-x-x-x- NOTHING FOLLOWS -x-x-x-x-x-x-x-			
			GRAND TOTAL >>>	

*

Brand and Model : _____ *Warranty :* _____
Delivery Period : _____ *Price Validity :* _____

After having carefully read and accepted your Conditions, I/We quote you on the item at prices noted above and hereby commit to deliver the same if adjudged to have the lowest and responsive quotation.

_____
Business Name

_____
Printed Name/Signature/Date

2024-03-240988