



REQUEST FOR QUOTATION

A. The Palawan Council for Sustainable Development Staff (PCSDS) invites all eligible and PhilGEPS-registered suppliers to quote the best offer for this procurement item subject to the specifications and/or terms and conditions and within the Approved Budget for the Contract, to wit:

Purchase Request No. **PR No. 22-12-12-101**

Project Title: **Representation Expenses**

(Presentation of ECAN Map Updating of Puerto Princesa

Mode of Procurement: **Negotiated Procurement - Small Value Procurement**

Approved Budget for the Contract: **Php 18,000.00**

Delivery Period: **30 Calendar Days from receipt of Notice of Proceed**

Location: **PCSD Office, Sports Complex Road, Barangay Santa Monica, Puerto Princesa City, Palawan**

Specifications: **See attached Annex "A" (if applicable)**

B. Interested supplier are required to submit the following Eligibility Documents during submission of offer/quotation:

B.1. Mayor's Permit/Business Permit (Certified True Copy);

B.2. PhilGEPS Registration Number (Certified True Copy);

C. The pro-forma quotation maybe submitted through registered or electronic mail to the PCSDS BAC Secretariat at above address or email to bacpcsd@gmail.com on or before DEC 23 2022 subject to the following Terms and Conditions:

- All entries shall be typed or written in a clear legible manner. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by the bidder or his/her duly authorized representative/s.
- All prices offered upon issuance of the quotation shall be valid, binding and effective throughout the effectivity of the contract for all delivery requests and/or billings.
- Price quotations to be denominated in Philippine Peso shall include all applicable government taxes subject to (BIR 2306) 5% R-VAT and (BIR 2307) 1% (PO) or 2% (JO) deductions.
- Award of contract shall be made to the lowest quotation, which complies with the minimum specification as stated above and other terms and conditions stated in the Price Quotation Form.
- Partial Bids are not allowed. Bids not addressing or providing all of the required items in the RFP/RFQs including, where applicable, bill of quantities, shall be considered non-responsive and, thus, automatically disqualified. Where a required item is provided, but no price is indicated, the same shall be considered as non-responsive, but specifying a "0" (zero) or dash (-) for the said item would mean that it is being offered for free to the Government.
- In the event two or more bidders submitted the same amount of quotations, the tie shall be resolved using "draw lots" or similar methods of chance.

D. For inquiry, you may contact us at (048) 434-4235.

Very truly yours,

Atty. MICHELLE ANDREA AUGUST F. SABUYA
BAC Secretariat



Republic of the Philippines
Palawan Council for Sustainable Development Staff
BIDS AND AWARDS COMMITTEE
 PCSD Bldg., Sports Complex Road, Brgy. Sta. Monica,
 Puerto Princesa City, Palawan

PRICE QUOTATION FORM

Project Title:	Representation Expenses (Presentation of ECAN Map Updating of Puerto Princesa City)		Date:		
			PQF No.:	22-12-12-101	
Sir/Madam: After having read and accepted the terms and conditions in the Request for Quotation, hereunder is our quotation/s for the item/s as follows;					
Item No.	Description and Specification	Unit	Quantity	Unit Price	Total Price
1	Catering with venue: buffet type 2 snacks and 1 lunch	pax	25		
	-nothing follows-				
TOTAL AMOUNT					
AMOUNT IN WORDS					
<p><i>We undertake, if our quotation is accepted, to supply/deliver the goods/services in accordance with the technical specifications and delivery instructions.</i></p> <p><i>We agree to abide by this Quotation for the price validity period specified in the terms and conditions and it shall remain binding upon us and may be accepted at any time before the expiration of that period.</i></p> <p><i>Until a Purchase Order or a Contract is prepared and executed, this Quotation shall be binding upon us. We understand that you are not bound to accept the lowest or any Quotation you may receive.</i></p>					

(Please provide **complete** information below)

Signature over Printed Name : _____
 Designation/Position : _____
 Name of Company : _____
 Business Address : _____
 Contact Number: _____
 E-mail Address: _____
 Company TIN: _____