



April 18, 2023  
 (Date)

**REQUEST FOR QUOTATION**  
**2023-373**

(SVP- Feeds and Drugs and Biologics)

**INSTRUCTIONS:**

1. Bidders are required to read the instructions and fill all the blanks properly.
2. Prospective Bidders/Suppliers may submit their own canvass form in accomplishing their bid proposals/quotations subject to the condition that the DARFO VI official RFQ form shall be filled up (with offered brand, unit price and total price), signed properly and attached together with the Bidder's/Supplier's own canvass form. (Please write legibly)
3. Any erasure or alteration in the unit and/or total price shall render the offer of the supplier invalid.
4. Any specifications other than those required/stated in this form shall not be considered in the evaluation of bids.
5. Quotation(s) must include all kinds of taxes for the item(s)/services listed hereunder, including delivery charges.
6. The **brand** name/model of the offered item(s)/product(s) or services **must** be indicated, if applicable/required.
7. Sealed Quotation(s) / Proposal(s) shall be submitted to the DA RFO VI, Procurement Service Office, RCPC Building, DA-WESVIARC., Brgy. Buntatala, Jaro, Iloilo City. Open quotations may also be submitted through e-mail at dareg6bac@yahoo.com.
8. **DEADLINE FOR SUBMISSION OF BIDS: April 25, 2023 at 12:00 nn.**
9. Price quotation(s) submitted shall be valid for a period of **45** days reckoned from the deadline for submission of quotations.
10. Awarding shall be done for the whole lot. Partial bids shall not be allowed.
11. Validity of stocks: **60** days.
12. Terms of payment: within 15 days after inspection and acceptance and shall be made through Land Bank's LDDAP-ADA/Bank Transfer facility. Bank Transfer fee, if any, shall be charged against the creditor's account.
13. Delivery period: **30 days upon receipt of NTP**
14. Delivery point: Municipal Agriculture Office Libertad, Iloilo; Municipal Agriculture Office Batad, Iloilo; Municipal Agriculture Office Bingawan, Iloilo; Municipal Agriculture Office San Lorenzo, Guimaras; Municipal Agriculture Office San Rafael, Iloilo
15. The period of submission of the following documents are as follows:

Document	Submission Period*	
Certified True Copy of Valid <b>Mayor's/Business Permit</b>	Before the issuance of Notice of Award	At the option of the supplier, may be submitted <b>during</b> the submission of its quotation
Certified True Copy of <b>PhilGEPS Registration Number</b> (Red or Platinum)		
<b>Omnibus Sworn Statement</b> (for ABC above Php 50,000.00)		
<b>Income Tax Return</b> (for ABC above Php 500,000.00)		
*Non-submission of any or all documentary requirements within 24 hours upon notice shall disqualify the lowest offeror from award and the BAC shall proceed to evaluate the next lower offer.		

16. Non-receipt of a Notice of Award within a period of **30 calendar days** from the deadline of the submission of the RFQ is presumed that this offer is non-responsive.

PR No. 2023-02-0679  
 Solicitation No. 2023-346

ABC: Php 630,000.00

End-User: **DOMINADOR A. MARQUEZ**  
 Contact No.

Qty.	Unit	Item Description	Brand Offered	Unit Price	Total Price
		<b>Procurement of Supply and Delivery of Premium Feeds and Drugs and Biologics</b>			
		<b>Chicken Feeds (50Kg/bag, Premium Feeds)</b>			
272	bag	Chicken Layer Crumble			
		<b>Drugs and Biologics</b>			
20	box	Doxycycline HCl + Tiamulin + Vitamins A, ViTB12, WSP, 5gx48/box			



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40	box	Levimasole HCl 10% Soluble powder, 10gx24/box			
20	box	Multivitamins + Electrolytes, 22gx24/box			
<b>Point of Delivery</b>					
		Municipal Agriculture Office Libertad, Iloilo			
98	bag	Chicken Layer Feeds			
6	box	Doxycycline HCl + Tiamulin + Vitamin A, VitB12, WSP, 5gx48/box			
12	box	Levimasole HCl 10% Soluble powder, 10gx24/box			
6	box	Multivitamins + Electrolytes, 22gx24/box			
		<b>Municipal Agriculture Office Batad, Iloilo</b>			
48	bag	Chicken Layer feeds			
4	box	Doxycycline HCl + Tiamulin +Vitamins A, VitB12, WSP, 5gx48/box			
8	box	Levimasole HCl 10% Soluble powder, 10gx24/box			
4	box	Multivitamins + Electrolytes, 22gx24/box			
		<b>Municipal Agriculture Office Bingawan, Iloilo</b>			
48	bag	Chicken layer feeds			
4	box	Doxycycline HCl + Tiamulin +Vitamins A, VitB12, WSP, 5gx48/box			
8	box	Levimasole HCl 10% Soluble powder, 10gx24/box			
4	box	Multivitamins + Electrolytes, 22gx24/box			
		<b>Municipal Agriculture Office San Lorenzo, Guimaras</b>			
48	bag	Chicken layer feeds			
3	box	Doxycycline HCl + Tiamulin +Vitamins A, VitB12, WSP, 5gx48/box			
6	box	Levimasole HCl 10% Soluble powder, 10gx24/box			
3	box	Multivitamins + Electrolytes, 22gx24/box			
		<b>Municipal Agriculture office San Rafael, Iloilo</b>			
30	bag	Chicken Layer feeds			
3	box	Doxycycline HCl + Tiamulin +Vitamins A, VitB12, WSP, 5gx48/box			
6	box	Levimasole HCl 10% Soluble powder, 10gx24/box			
3	box	Multivitamins + Electrolytes, 22gx24/box			
<b>Terms and Conditions:</b>		<ul style="list-style-type: none"> <li>• Supplier should be BAI Registered Feed Trader/Supplier/Distributor and establishment</li> <li>• Delivery is within one week from the date of manufacturing/ production</li> <li>• With Certificate of feeds Product Registration from BAI</li> <li>• Supplier should have an establishment in Western Visayas or Joint Venture Agreement otherwise.</li> </ul>			
		<b>TOTAL</b>			



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For the Bids and Awards Committee:

\_\_\_\_\_  
**MS. HUSSEIN A. DEROTAS**  
 GEPS Posted/DA Website/1 conspicuous place

\_\_\_\_\_  
**MS. MAE P. NONES**  
 Head, Procurement Service Office

\_\_\_\_\_  
**SHERY LYN AZARCON / CHARMAE ANTIPATIA**  
 Canvasser

	Submission of RFQ	Signature over printed name
	RFQ to be collected on	
	RFQ to be submitted by supplier before deadline	

The DA RFO VI  
 Bids and Awards Committee  
 WESVIARC, Brgy. Buntatala  
 Jaro, Iloilo City

**SIR / MADAM:**

In connection with the above request, I/we submit our quotation indicated above. I/We have carefully read and fully understood the minimum requirements and agree to furnish and/or deliver in conformity with the specifications any or all said articles described above within the date stipulated herein.

\_\_\_\_\_  
 Signature over Printed Name

\_\_\_\_\_  
 Registered Name of Company

\_\_\_\_\_  
 Tax Identification Number  
 (indicate VAT or non-VAT registered)

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Contact number(s)

\_\_\_\_\_  
 E-mail Address

\_\_\_\_\_  
 Banking Institution

\_\_\_\_\_  
 Branch

\_\_\_\_\_  
 Account Name

\_\_\_\_\_  
 Account Number

\_\_\_\_\_  
 Date Accomplished

PR# 2023-02-0679  
 RFQ# 2023-373