

Republic of the Philippines **DEPARTMENT OF AGRICULTURE WESTERN VISAYAS**

Hamungaya, Brgy. Buntatala, Jaro, Iloilo City westernvisayas@mail.da.gov.ph | (033) 336-4221

PR# 2024-1043

June 4, 2024 Date

REQUEST FOR QUOTATION

2024-577 (SVP)

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. Sealed Quotation(s) / Proposal(s) shall be **manually submitted** to DA Western Visayas, Procurement Service Office, RCPC Building, DA-WESVIARC., Brgy. Buntatala, Jaro, Iloilo City with the **Name of Supplier, PR Number, and Deadline for Submission**.
- 7. DEADLINE FOR SUBMISSION OF BIDS: June 11, 2024 at 1:00 pm.
- 8. Price quotation(s) submitted shall be valid until the last day of training/activity.
- 9. Awarding shall be done for the whole lot. Partial bids shall not be allowed.
- 10. Validity of stocks: not applicable.
- 11. 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.
- 12. Delivery point: WESVIARC, Hamungaya, Jaro, Iloilo City
- 13. Delivery period: 30 days after receipt of NTP
- 14. The period of submission of the following documents are as follows:

Document	Submission Period*
Certified True Copy of Valid	
Mayor's/Business Permit	Should be submitted
Certified True Copy of PhilGEPS	upon submission of
Registration Number (Red or Platinum)	Request for
Omnibus Sworn Statement	Quotation
(for ABC above Php 50,000.00)	
Income Tax Return]
(for ABC above Php 500,000.00)	

15. 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.



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PR No. 2024-1043 Solicitation No. 2024-397 ABC: Php 353,400.00

End-User: ENGR. JACKSON DEMAMAY Contact No.

Quantity	Unit	Item Description	Brand Name/Model Offered	Unit Price	Total
		Procurement of Supply and Delivery of Farm Inputs and Various Pesticides			
30	bag	Triple 14 (14-14-14-S) (@50kg/bag)			
10	bag	Urea (46-0-0) (@50kg/bag)			
20	bag	Ammonium Phosphate, (16-20-0),50kg/bag			
20	bag	Ammonium Sulfate, (21-0-0),50kg/bag			
10	bottl e	2-methyl 4-chlorophenoxyacetic acid (MCPA)(400g/liter),1000mlfbottle			
10	bottl e	Penoxaprop-p-ethyl+ ethoxysulfuron,69+21g/liter,500 ml/bottle			
10	bottl e	Phentoate + BPMC,2 50g/liter+IOOg/liter,EC,1000 ml/bottle			
10	box	Niclosamide Ethanolamine Salt,700g/kg,WP (@IOsachet/box)			
10	box	Metaldehyde, Pellets, 6% A.I/ kg, lkg/box			
20	bottl e	Pretilachlor + Safener(28.7%pretilachlor) (@1,000mlfbottle)			
10	bottl	Cyhalofop-Butyl+Byspyribac Sodium			
	е	150g/liter+50g/liter,OD (@1,000ml/bottle)			
10	bag	Carbufuran 3g,30g/kg,G at 16.7 kg/bag			
40	pack	Benomyl,500g/kg at l00g/pack			
20	bottl e	Lamdacyhalotrin (25g/liter),1,000ml/bottle			
18	gallo n	Glyphosate (480g/liter),4 liters/gallon			
		Terms and Conditions: Formulation date must notearlier than June 2022 Must be FDA registered TOTAL			



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For the Bids and Awards Committee	2 :		
ATTY. ROLIN M. ASUNCION Head, BAC Secretariat			
DA WESTERN VISAYAS Bids and Awards Committee WESVIARC, Hamungaya, Jaro, Iloilo City			
SIR / MADAM:			
and fully understood the minimum	uest, I/we submit our quotation indicant requirements and agree to furnish and les described above within the date sti	nd/or deliver in conformity with the	
Signature over Printed Name	ture over Printed Name Registered Name of Company Tax Ident (Indicate registered		
Address	Contact number(s)	E-mail Address	
Banking Institution	Branch	Account Name	
Account Number	_	Date Accomplished	