

September 13, 2024  
Date

**REQUEST FOR QUOTATION**  
2024-1040  
(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: **September 16, 2024 at 5:00 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 period: **October to December 2024**
13. Delivery point: **Iloilo City**
14. 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>	Should be submitted upon submission of Request for 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)	

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.

**PR No. 2024-1645**

**ABC: Php 459,000.00**

**End-User: ATTY. ROLIN M. ASUNCION**

**Solicitation No. 2024-658**

**Contact No.**

Quantity	Unit	Item Description	Meals	Unit Price	Total
		Provision for Catering Services for the conduct of ManCom/ ExeCom Meetings for the Fourth Quarter of 2024			
45	pax	4 <sup>th</sup> Quarter of 2024 ManCom (45 pax for 12 days)	Snacks Lunch		
Terms and Conditions:		<ol style="list-style-type: none"> <li>Food/ meals to be served on time (Snacks and Lunch)</li> <li>Should be buffet style during meals</li> <li>With free-flowing BREWED coffee and chocolate drink for the entire activity</li> <li>With water station (hot and cold)</li> <li>Dining utensils (plate, spoon &amp; fork, etc.) should not be plastic/disposable</li> <li>Menu: AM/PM Snacks:  <ul style="list-style-type: none"> <li>- Arroz Caldo/ Sandwich/ Burger/ Pasta (PM Snack should be packed)</li> <li>- Canned drinks/soda</li> </ul> Lunch:  <ul style="list-style-type: none"> <li>- 1 dish for pork/ beef, seafood, chicken, vegetable, soup, rice, dessert</li> <li>- Canned drinks (soda or plant-based juices) and bottled water</li> </ul> </li> </ol>			
		<b>TOTAL</b>			

For the Bids and Awards Committee:

**REIN T. OROCIO**

Head, BAC Secretariat

**DA WESTERN VISAYAS**

Bids and Awards Committee  
WESVIARC, Hamungaya,  
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