



REQUEST FOR QUOTATION

PR No. : _____

DATE : _____

JO No. : 0923-0009

Name of Company: _____

Address: _____

Business Permit No: _____

TIN No.: _____

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided at the dorsal portion of this Request for Quotation. Submit your quotation duly signed by you or your duly authorized representative not later than _____, 2023.

JINKY P. MORENO
 Procurement Assistant A

After having carefully read and accepted the Terms and Conditions below, I/we submit our quotation/s for the item/s as follows:

ITEM #	ITEM DESCRIPTION	Approved Budget of the contract	OFFER					REMARKS	
			PRICE			Compliance with technical specifications			
			QTY.	UNIT	UNIT PRICE	TOTAL	YES		NO
	PhP: 150,000 - 1 LOT EMERGENCY POTTING/SOIL BAGGING IN LINE WITH THE CANOPY 25 TREE PLANTING ACTIVITY WITHIN MKWD AREA. SPECIFICATIONS: (SEE ATTACHED TERMS OF REFERENCE) - 550,000 PCS 4 X 6 INCHES NURSERY POLYBAG - INCLUDING FILING						<input type="checkbox"/>	<input type="checkbox"/>	

GRAND TOTAL: _____

Signature Over Printed Name: _____

Contact Number (Landline/Cellphone)/Email Address _____

Please submit the following requirements:

- Mayor's Permit
- Professional License/Curriculum (Consulting Services)
- Philgeps Registration Number
- PCAB License (Infra)
- Income Business Tax Return
- Omnibus Sworn Statements

OTHER TERMS AND CONDITIONS:

1. The mode of payment is within six (6) months upon issuance of IAR three (3) months upon issuance of IAR Two (2) months upon issuance of IAR One (1) month upon issuance of IAR.
2. Bidders shall provide correct and accurate information required in this form.
3. Bidders may quote for any at all times except for one (1) lot requisition.
4. Price quotation/s must have:
 - validity - Thirty (30) Calendar days
 - inclusion of tax
 - Quotations exceeding the Approved Budget for the Contract shall be rejected.
 - Award of contract shall be made to the lowest quotation (for goods and services)
 - Erasures or overwriting is not allowed unless signed by duly authorized representative/s.
5. The item/s shall be delivered within _____ () days / months from receipt of Notice to Proceed (NTP) with Purchase Order & Notice of Award (NOA) and Job Order Contract & Notice of Award (NOA).
6. The awardee shall notify two (2) days before its delivery of goods and services.
7. The MKWD shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
8. Liquidated damages equivalent to one tenth of one percent (0.001%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The MKWD shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.

Republic of the Philippines
METRO KIDAPAWAN WATER DISTRICT

Lanao, Kidapawan City

Tel nos. (064)577-1533, 577-1865, Fax no. (064) 572-5555

E-mail Address: metrokidapawan_wd@yahoo.com

Website: www.metrokidapawanwd.gov.ph

"Committed to Service, Development and Self-Reliance"



ISO 9001:2015 Certified
 Cert. No. 66478

TERMS OF REFERENCE

PURPOSE	Emergency Potting/Soil Bagging in line with Canopy' 25 tree planting activity within MKWD area.		
PARTICULARS	<input type="checkbox"/> PR <input type="checkbox"/> JO No.:	Date:	4-Sep-23

ITEMS, SPECIFICATIONS, AND DESCRIPTIONS	
ITEM 1 Potting/Soil Bagging	ITEM 2
SPECIFICATIONS: 1 550,000 pcs. 4x6 inches nursery Polybag 2 including filing	SPECIFICATIONS: 1 2
ITEM 3	ITEM 4
SPECIFICATIONS: 1 2	SPECIFICATIONS: 1 2
ITEM 5	ITEM 6
SPECIFICATIONS: 1	SPECIFICATIONS: 1

SOURCE OF FUND	APP/PPMP Item No.:	
	Account No.:	861 9

MODES AND TERMS OF PAYMENT	Within 60 days (3 mode of payment base on actual accomplishment during 40%, 70% and 100%)
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REQUIRED SERVICES	
<input type="checkbox"/> Free Delivery <input type="checkbox"/> Free Product Demonstration <input type="checkbox"/> Free Installation	Others specify: N/A

REQUIRED CERTIFICATIONS/ PERMITS	N/A
QUALIFICATIONS	N/A

AREA OF DELIVERY	Saguing River Watershed
DATE OF DELIVERY	Monday-Friday
TIME OF DELIVERY	8:00 AM - 5:00 PM

RETENTION	Amount:	N/A
	Duration:	N/A
TAX INCLUSIVE	Yes	

N/A

Prepared by:	Reviewed by:
FOR NOEL S. BAQUID Watershed Management Specialist	
Noted by:	Approved/Disapproved by:
WILESPER LISANDRO M. ALQUEZA, CE/RMP/MBA Material Standards Commiffee Chairman	STELLA M. GONZALES, MPS General Manager