



Republic of the Philippines  
 Department of Justice  
**BUREAU OF CORRECTIONS**  
**SABLAYAN PRISON AND PENAL FARM**  
 Occidental Mindoro



**REQUEST FOR QUOTATION**

**SUPPLY AND DELIVERY OF ACCOMODATION, MEALS AND SNACKS FOR CONDUCT OF  
 PMT ON-SITE VALIDATION**

Date: \_\_\_\_\_  
 RFQ No: SPPF2024-PR.046

Name of Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Name of Store/Shop: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Business Permit No.: \_\_\_\_\_  
 TIN No.: \_\_\_\_\_  
 PhilGEPS Registration No.: (required) \_\_\_\_\_

Please quote your best offer for the item/s described below, subject to the Terms and Conditions as stated hereunder.

- a.) Bidders shall provide correct and accurate information required in this form.
- b.) Bidders shall **quote per lot.**
- c.) Price quotation/lot must be valid for a period of **One Hundred Twenty (120) calendar days** from the date of submission.
- d.) Price quotation/lot, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable.
- e.) Quotation exceeding the Approved Budget for the Contract shall be rejected.
- f.) Award of contract shall be made to the lowest quotation/lot (for goods and infrastructure) or, the highest rated offer/lot (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
- g.) Any alterations, erasures or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.
- h.) All items shall be delivered within **thirty (30) calendar days** from the receipt of approved Notice to proceed (NTP).
- i.) The BuCor-SPPF shall have the right to inspect and/or to test the goods to confirm its conformity to the technical specifications.
- j.) Liquidated damages equivalent to one tenth of one percent (0.1%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The BuCor-SPPF 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.
- k.) Bidders shall submit the required documents together with their bid price in a sealed envelope.
- l.) **Submission thru e-mail and fax of your quotation will not be entertained/accepted. Send your sealed quotation thru mail or submit it personally at the address hereunder provided.**

**REQUIREMENTS TO BE SUBMITTED**

1. Certified True copy of Valid & Current Mayor's/Business Permit
  - a. Valid & Current Mayors Permit
  - b. Valid & Current Business Permit
2. Certified True copy of Valid & Current PhilGEPS Registration Number
3. Bidders who are registered in BuCor-SPPF Suppliers Registry **with updated record** need not to submit the aforementioned requirements.

**NOTE:**

**BIDDERS STATEMENT OF COMPLIANCE ON THE TERMS & CONDITIONS AND REQUIREMENTS AS STATED ABOVE**

\_\_\_\_\_  
 Signature over Printed Name of  
 Authorized Representative / Sole Proprietor

Submit your sealed quotation duly signed by you or your duly representative not later than **JULY 8, 2024** at the BAC Office, Bureau of Corrections – Sablayan Prison and Penal Farm at **9:00 A.M.** Late submission of bids shall be rejected..

\_\_\_\_\_  
 CCINSP DIOMEDES D DADOR JR  
**BAC Chairperson**

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

**REQUEST FOR QUOTATION #SPPF2024-PR. 046**

Procurement Project					Approved Budget for the Contract (ABC)			
SUPPLY AND DELIVERY OF ACCOMODATION, MEALS AND SNACKS FOR CONDUCT OF PMT ON-SITE VALIDATION					One Hundred Twenty-Four Thousand Pesos (PHP 124,000.00)			
QTY	UNIT	DESCRIPTION	Compliance to the Technical specifications (Please check)		Approved Budget of the Contract (ABC)/Lot	Offered Quotation Per Unit	Offered Quotation Per Unit X Quantity	TOTAL Offered Quotation/Lot
			YES	NO				
10	PAX	MEALS (BREAKFAST, LUNCH, AND DINNER FOR 5 DAYS)			PHP 124,000.00			
10	PAX	AM SNACKS FOR 5 DAYS						
10	PAX	PM SNACKS FOR 5 DAYS						
30	PAX	OPENING AND EXIT CONFERENCE						
10	PAX	5 ROOMS ACCOMODATION FOR 5 DAYS						

\_\_\_\_\_  
**SIGNATURE OVER PRINTED NAME OF REPRESENTATIVE OR SOLE PROPRIETOR**  
**POSITION/DESIGNATION:** \_\_\_\_\_  
**OFFICE TELEPHONE NO:** \_\_\_\_\_  
**MOBILE PHONE NO./FAX NO.:** \_\_\_\_\_  
**EMAIL ADDRESS/ES:** \_\_\_\_\_