

Republic of the Philippines Department of Education

NATIONAL CAPITAL REGION SCHOOLS DIVISION OFFICE OF MUNTINLUPA CITY

October 01, 2024

REQUEST FOR PRICE QUOTATION (RFQ)

Please quote your lowest price, inclusive of taxes on the item/s listed below, not higher than **One Hundred Thousand Pesos (PhP 100,000.00)** being the Approved Budget for the Contract (ABC) and submit the signed and sealed quotation to the Office of the BAC Chair, thru the Receiving Section of the SDO, **on or before October 04, 2024; 10:00 am**. Quotations higher than the ABC shall be rejected.

For more information, please contact Ms. Lourdes V. Rodilla/Mr. Joseph D. Nilo/Ms. Joiche I. Luna, BAC Secretariat Chair at Tel. No. (02) 8829-2308 loc. 129/120 or at sdomuntinlupabacsec@gmail.com.

MADELINE ANN L. DIAZ

BAC Vice Chairperson

| item No | Qty. | Unit | Item Description | PRICE | | | |
|------------|------|------|--|-------------|-------|-------|--|
| | | | | ABC | QUOTE | | |
| 140 | | | | | Unit | Total | |
| ВОА | | | LOT 1 IG FOR THE CONDUCT OF TRAINING WORKSHOP ON T ROGRAM SUPERVISORS (EPS) AND PUBLIC SCHOOLS I | | | | |
| | | | Date: October 10 - 11, 2024 Time: 8:00 am - 5:00 pm | | | | |
| | | | Type of Accommodation: *Board and Lodging (Full Board) - Twin/Triple Sharing Rooms, (Separate Beds) - 24 Hours Hot and Cold Shower - Clean Beddings, Rooms and Restrooms Check-in Time: 2:00 PM, October 10, 2024 Check-out Time: 12NN, October 11, 2024 - Provision of Toiletries (towel, soap, etc) Meal Requirements: | | | | |
| 1 | 25 | рах | Day 1: AM Snack Lunch (Managed Buffet) PM Snack Dinner (Managed Buffet) | ₱ 50,000.00 | | | |







| tem | | | PRICE | | |
|-----|----------|--|---------------------------------------|-------------|-------|
| No | Qty. Uni | t Item Description | ABC | QUOTE | |
| | | LOT 1 | | Unit | Total |
| ВОА | | GING FOR THE CONDUCT OF TRAINING WORKSHOP OF PROGRAM SUPERVISORS (EPS) AND PUBLIC SCHOOL | 경우 중요 살아 있다면 이 경우 모양 등에 가를 내려 있다고 있다. | | |
| 2 | 25 pax | | P 50,000.00 | ISORS (PSD) | |

| Item No | Qty. | Unit | | PRICE | | | | |
|--|------------|--------------------------|--|--|--|--------------|---------------|--|
| | | | Item Description | | ABC | QUOTE | | |
| IAO | | | | | ABC | Unit | Total | |
| ВОА | | | G FOR THE CONDUCT OF TRAIL COGRAM SUPERVISORS (EPS) A Other Requirements: - Maintaining cleanliness and the following areas, functions sleeping quarters, hallway, | regular disinfection of ional hall, restrooms, | | | | |
| | | | dining area. - Provision of disinfectant a areas. - With appropriate parking ar - With 24-hour security housekeeping services. * Preferably within Muntinlu areas. | rea. y, front desk and | | | | |
| Facility after su | or throug | gh Land E n of an inv | nent shall be made by the Pro Bank's cheque whichever is the voice or claim by the Supplier. B | preferred payment of th | e supplier, not la | ter than six | kty (60) days | |
| Mayor's Permit No: Issued on: Issued at: SEC/CDA/DTI Registration No.: | | | | Contact Number: Landline No.: Mobile No.: Name of Owner / Authorized Representative: | | | | |
| PhilGEF | PS Registi | ration No |).: | Signature: | - Laboratoria de la companyo de la c | | | |

Important Terms

Each supplier shall fill-up this Request for Price Quotation Form with the following attachments:

- photocopy of the valid business permit/ mayor's permit
- photocopy of SEC / DTI / CDA registration
- photocopy of PhilGEPS registration
- photocopy of the Income Tax Return

All technical specifications are mandatory. Suppliers shall indicate the brand, model and complete specification of the offered commodity. The form must be signed by the owner/ authorized

representative. Should there be submission of a separate quotation with a different declared amount, the quote in the RFQ prevails.

Failure or non-compliance to the above-cited pre-requisites shall be ground for the supplier's disqualification.