DEPARTMENT OF AGRICULTURE
Caraga Region
Capitol Site, Butuan City
Tel. No: (085) 342-4092 Telefax No.: (085) 341-2114

REQUEST FOR QUOTATION

Date: _____
Quotation #: _____

_____
Name of Company

_____
Address

_____
TIN

Please quote your lowest price inclusive of taxes in the items/s listed, subject to the General Conditions below, stating the shortest time of delivery. Submit your quotation duly signed by your representative not later than **3 days upon receipt** in sealed envelope marked with the reference no. (PR# 24-02-ILD035)

JOHNNY M. CONCON
Chairman, Bids and Awards Committee

ITEM NO.	ITEM & DESCRIPTION	BRAND	UNIT	QUANTITY	UNIT COST	TOTAL COST
	Pressure Cooker (Autoclave)		unit	1		
	Specifications:					
	Capacity: Minimum:41L, Maximum:45L					
	Material: Aluminum					
	Stay-cool (top handle) : YES					
	Steam gauge: YES					
	Pressure Regulator: YES (Maximum:15psi)					
	One (1) year warranty					
	Free on-site delivery					
	To be delivered at Regional Crop Protection Center					
	Trento, Agusan del Sur					

ABC: 90,000.00
Source of fund: OA

General Conditions:

1. *All entries must be typewritten/printed in ink.*
2. *Delivery period within_____ calendar days based on the contract.*
3. *Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment from date of acceptance by procuring entity.*
4. *Price validity shall be for a period of_____ calendar days*
5. *PhilGEPS Registration Certificate, Business Permit, DTI Certificate and Tax Registration Certificate shall be attached upon submission of the quotation, if applicable.*
6. *Bidders shall submit original brochures showing specification of the products being offered.*
7. *Winning bidder(s) from outside Butuan City must appear personally or sent authorized representative to signed contract and claimed payments.*

After having carefully read and accepted your General Conditions, I/We quote on the item at prices noted above.

_____
Printed Name/Signature of Company

_____
Name and Signature of Canvasser

_____
Tel. No. / CP No. / email address

_____
Date