



Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
REGIONAL OFFICE NO. IV-A
Canlubang Interchange, Brgy. Mayapa, City of Calamba, Laguna

Name of Procuring Entity :	Request for Quotation (P.R. No.): 2024-10-0104
Revised on :	Date: November 6, 2024
Standard Form/Title :	REQUEST FOR QUOTATION Office/End-User: ADMIN
COMPANY NAME :	
ADDRESS :	
TEL. NO./FAX NO. :	TIN :

Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than **10:00 A.M. of November 11, 2024** in the return envelope attached herewith.

TERMS and CONDITIONS :

- All entries must be typewritten or legibly written
- Delivery period **within Training Days** or upon receipt of the approved funded Purchase Order (P.O). Administrative penalties pursuant to Sec.69 of the Revised IRR-RA 9184 shall be imposed for non-delivery without valid reason
- Warranty shall be for a minimum of three (3) months for supplies & materials; one year for Equipment; one (1) year IT Equipment from date of acceptance by the end-user.
- Price validity shall be for a period of sixty (60) calendar days.
- PhilGEPS Registration Certificate/Mayor's Permit/Tax Clearance/Income/Business Tax Return (For ABCs above Php500k)/Omnibus Sworn Statement (For ABCs above Php50k) shall be attached upon submission of the quotation enclosed with Brown Envelope.
(CERTIFIED TRUE COPY)
- Please indicate the brand for each items being offered.
- In case two or more bidders are determined to have submitted the Lowest Calculated Quotation/Lowest Calculated and Responsive Quotation, the Department shall adopt and employ "Toss Coin or Draw Lots" as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005
- The approved budget ceiling for this procurement is **Php 54,000.00**

SIGNATURE REDACTED

JOEL F. LIMPENSCO

Director III
Assistant Regional Director
BAC Chairperson

Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
	Meals for the use of participants in Training; The use of Project and Contract Management Application (PCMA) to be held on Training Room A of DPWH IV-A Canlubang Interchange, Brgy. Mayapa, City of Calamba, Laguna on November 25-26, 2024				
1	November 25, 2024	45	pax		
	AM Snack (8:45AM)				
	Arrozcaldo w/ egg, Lumpiang Togue, Tokwa't Baboy				
	Lunch (10:45AM)				
	Beef Broccoli, Sauteed Vegetables with Quail Egg, Steamed Rice,				
	Pumpkin Soup, Panna Cotta, Four Season Juice				
	PM Snack (2:45PM)				
	Fish Fillet Burger, Sweet Potato Fries, Orange Juice				
2	November 26, 2024	45	pax		
	AM Snack (8:45AM)				
	Chicken Sotanghon Soup, Pandesal, Lemon Cucumber Water				
	Lunch (10:45AM)				
	Chicken Inasal with Toyo Mansi, Tortang Talong, Steamed Rice,				
	Crab and Corn Soup, Tiramisu, Avocado Juice				
	PM Snack (2:45PM)				
	Pizza, Chicken Nuggets, Mango Juice				
	Note: FOR ALL INDICATED DATES				
	• Overflowing Brewed Coffee + Creamer (available as early as 7:00am)				
	• Pica pica (Assorted candies and chips)				
	• To maintain the quality and freshness of the food being served to the place of business as reflected in the government permits and kitchen/commissary should be within 20km radius of the Regional Office or the venue of the training/seminar.				
		TOTAL AMOUNT			



Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
REGIONAL OFFICE NO. IV-A
Canlubang Interchange, Brgy. Mayapa, City of Calamba, Laguna

Name of Procuring Entity :	Request for Quotation (P.R. No.): 2024-10-0104
Revised on :	Date: November 6, 2024
Standard Form/Title :	REQUEST FOR QUOTATION Office/End-User: ADMIN
COMPANY NAME :	
ADDRESS :	
TEL. NO./FAX NO. :	TIN :

Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than **10:00 A.M. of November 11, 2024** in the return envelope attached herewith.

TERMS and CONDITIONS :

1. All entries must be typewritten or legibly written
2. Delivery period **within Training Days** or upon receipt of the approved funded Purchase Order (P.O). Administrative penalties pursuant to Sec.69 of the Revised IRR-RA 9184 shall be imposed for non-delivery without valid reason
3. Warranty shall be for a minimum of three (3) months for supplies & materials; one year for Equipment; one (1) year IT Equipment from date of acceptance by the end-user.
4. Price validity shall be for a period of sixty (60) calendar days.
5. PhilGEPS Registration Certificate/Mayor's Permit/Tax Clearance/Income/Business Tax Return (For ABCs above Php500k)/Omnibus Sworn Statement (For ABCs above Php500k) shall be attached upon submission of the quotation enclosed with Brown Envelope.
(CERTIFIED TRUE COPY)
6. Please indicate the brand for each items being offered.
7. In case two or more bidders are determined to have submitted the Lowest Calculated Quotation/Lowest Calculated and Responsive Quotation, the Department shall adopt and employ "Toss Coin or Draw Lots" as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005
8. The approved budget ceiling for this procurement is **Php 54,000.00**

SIGNATURE REDACTED

JOEL F. LIMPENGCO

Director III
Assistant Regional Director
BAC Chairperson

Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
* * * * *					

Purpose: Purchase of Meals for use of participants in Training; The use of Project and Contract Management Application (PCMA) to be held in DPWH Regional Office IV-A on November 25-26, 2024

Brand and Model	:	_____	Warranty	:	_____
Delivery Period	:	_____	Price Validity	:	_____

After having carefully read and accepted your General Conditions. I/We quote you on the item(s) at prices note above. If the space for Delivery Period, Warranty and Price Validity are left blank, it means that I concur with the Terms and Conditions specified by DPWH Region IV - A.

Tel. No.: (049) 3481-02-14 to 15

r4a.procurement@gmail.com

DPWH REGION IV-A-Procurement Unit

Printed Name / Signature / Designation / Date

Tel. No./Cellphone No./E-mail Address

HFSD

SMALL VALUE PROCUREMENT