



Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 8484996
Procuring Entity PROVINCE OF BENGUET
Title 750 boxes of powdered maternal milk
Area of Delivery Benguet

Solicitation Number: SV-0249-22	Status	Active
Trade Agreement: Implementing Rules and Regulations	Associated Components	1
Procurement Mode: Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification: Goods	Document Request List	0
Category: Dairy Products	Date Published	03/03/2022
Approved Budget for the Contract: PHP 375,000.00	Last Updated / Time	03/03/2022 00:00 AM
Delivery Period: 14 Day/s	Closing Date / Time	08/03/2022 08:30 AM
Client Agency:		
Contact Person: JULIE P. TABCAO BAC -GOODS SEC CHAIRPERSON Benguet Province, La Trinidad Benguet Philippines 2601 63-74-4222609 Ext.135 pgobacgoods@benguet.gov.ph		

Description

750 boxes of powdered maternal milk

Please refer to attached Request for Quotation

*****PHO*****

Other Information

Download the attached RFQ and Memorandum to Canvassers by clicking the figure opposite the Associated Components on this page then submit both documents at BAC Office, 2nd floor, Capitol Building, La Trinidad or through e-mail at pgobacgoods@benguet.gov.ph

Created by Marie Claire Salbino Baldos

Date Created 02/03/2022

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Republic of the Philippines
PROVINCE OF BENGUET
 La Trinidad
BIDS AND AWARDS COMMITTEE
(GOODS AND SERVICES)

Quotation No.: SV-0249-22
 Purchase Request No.: 22-02-0271

February 10, 2022
 Date

MEMORANDUM TO:

Mr./Ms.: SALINIA L. CARBONNEL
 (Canvasser)

Kindly provide appropriate dealers/ establishments copy of the attached request for quotation and/or solicitation to Bid for the Purchase of 750 boxes Powdered maternal milk with an ABC of 375,000.00 to be used by PHO Their quotation /Bids shall be opened on March 8, 2022

NAME OF ESTABLISHMENT	ADDRESS	RECEIVED		
		Name	Signature	Date
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

for: [Signature]
MIRIAM V. TIONGAN, DVM
 Chairperson

CERTIFICATION

I/We the undersigned, hereby jointly and severally certify to have given each of the above dealers/establishments a copy of the solicitation bid papers and submit their quotations before the time of opening of the same.

CANVASSER/S:

SALINIA L. CARBONNEL
Signature over printed name/s

CERTIFICATION

This is to certify that the RFQ received is a download copy and submitted through email / courier.

NOLI U. GUIAD
Administrative Officer V



Republic of the Philippines
PROVINCE OF BENGUET
 La Trinidad
BIDS AND AWARDS COMMITTEE
(GOODS AND SERVICES)

Purchase Request Number: **22-02-0271** Date: **February 10, 2022**
 Name of the Project: **Purchase of 750 boxes Powdered maternal milk** Quotation No.: **SV-0249-22**
 Location of the Project: **PHO** CAFOA No.: **100220100696**
 Account Code: **5-02-03-050** Appropriation No.: **22-01-0575**

REQUEST FOR QUOTATION

Sir/Madam:

Kindly indicate your price quotation/s for the item/s listed below taking into consideration the specifications; submit this document duly signed by you or your authorized representative, to this office not later than **8:30 AM** on **TUESDAY** **March 8, 2022** at the **BAC Goods and Services Office, 2nd Floor, Capitol Building, La Trinidad, Benguet.**

Indicate also the shortest delivery period should you opt to. You may fax your quotations through Telefax No. 074-422-2004 or thru e-mail at pgobacgoods@benguet.gov.ph/bacgoods@benguet.gov.ph

Should your quotation/s be found reasonable, procurement shall ensue. The Provincial Government however, reserves the right to accept or reject your offer or quotation/s if found not in order.

Thank you very much.

MIRIAM Y. TIONGAN, DVM
 Chairperson

REQUIREMENTS:

1. This Request Form must be duly accomplished; all entries must be Typewritten or handwritten legibly and in pen.
2. Delivery period shall be within 14 Calendar Days
3. Warranty shall be for a period of **three (3) months** for supplies and materials and **one (1) year** for equipment reckoned from the date of acceptance by the provincial government, through the Provincial General Services Office.
4. Price validity shall be for a period of **120 calendar days.**
5. Documentary requirements to be submitted with this RFO:
 - a. Mayor's/ Business Permit (**proof of renewal if expired**)
 - b. BIR Certificate of Registration
 - c. PhilGEPS Registration No. _____ (kindly indicate)
 - d. Lates Income/ Business Tax Return (if the ABC is above **Php 500,000.00**)

** In lieu of a and c above, certified true copy of PhilGEPS Platinum membership may be submitted*
6. Submit original copy of complete (paragraphs 1 to 10) Omnibus Sworn Statement **within three (3) days from Notice of this Body if the aggregate total ABC of the items quoted exceeds Php 500, 000.00**
7. The procuring entity reserves the right to waive any defects in the tender or offer as well as the right to accept the bid most advantageous to the provincial government.

NOTE:

- a. All erasures to be countersigned.
- b. Kindly seal this document upon submission to the BAC Goods and Services Office

Item No.	QTY	UNIT	ITEM & DESCRIPTION (SPECIFICATIONS)	BRAND/ OFFER/ COMPLIANCE TO SPECS.	UNIT PRICE	TOTAL	Approved Budget for the Contract (ABC)	
1	750	box	Powdered maternal milk, \leq 375 gm, chocolate, vanilla flavor, high in iron, folate & calcium plus vitamins & minerals or essential nutrients for pregnant women.				375,000.00	
PURPOSE: Milk to be used as micronutrient supplementation for pregnant women -PHO-PNC for CY 2022.							375,000.00	

DEALER'S OFFER (IF APPLICABLE)

Brand and Model: _____ Warranty period for supplies & materials: _____
 Delivery Period: _____ Price Validity Period: _____

CANVASSERS:

CERTIFICATION

I hereby certify that I have personally conducted this canvass and that the price/s quoted is/are true and correct and the signature of the Representative of the establishment who submitted the quotation/s is/are genuine.

After having carefully read and accepted your terms and conditions, I hereby submit the above quotations for your appropriate action.

 (Name of Establishment per O.R. & address)

 (Signature over Printed Name of Owner/Representative)

 (Telephone/Cellphone Number or e-mail address)

SALINIA L. CARBONNEL

 PRINTED NAME & SIGNATURE OF AUTHORIZED CANVASSER

 Date