



Department of Environment and Natural Resources  
**MINES AND GEOSCIENCES BUREAU - R. O. V**  
Regional Center Site, DENR Annex Building  
Rawis, Legazpi City

### REQUEST FOR QUOTATION

Quotation No. 2020-004  
P.R. No. 2020-01-007

The Mines and Geosciences Bureau Regional Office No. V (MGB RO V), through the General Appropriation Act (GAA) for CY 2020 intends to apply the sum **Fifty Six Thousand Four Hundred Pesos (Php 56,400.00)** being the Approved Budget for the Contract (ABC) to payments under the contract for **"One (1) Lot Laboratory Supplies"** Bids received in excess of the ABC shall be automatically rejected a bid opening.

Please quote your lowest price on the item/s listed, subject to the General Conditions stated herein, stating the shortest time of delivery and submit your quotation duly signed not later than **February 18, 2020 at 4:00pm** in sealed letter envelope with your company and quotation number written at the back of the envelope.

For inquiry, you may contact us tel. no. 482-1056/482-1156 and email [mgr5bacsecretariat@gmail.com](mailto:mgr5bacsecretariat@gmail.com)

  
ANTONIO C. MARASIGAN  
BAC Chairperson

#### Terms and Conditions:

1. All entries must be legibly written.
2. Price offers exceeding the Approved Budget for the Contract (ABC) shall be automatically disqualified.
3. Total price quotation shall be inclusive of taxes.
4. Price validity shall be for a period of 120 calendar days.
5. Bidders shall submit original brochures showing of the product offered.
6. The item/s shall be delivered within \_\_\_\_\_ calendar days from receipt of purchase order.

The supplier shall submit the following documents during submission of offer/quotation:

1. Mayor's/ Business Permit
2. PhilGEPS Registration Number
3. Omnibus Sworn Statement

### PRICE QUOTATION FORM

Date : \_\_\_\_\_

The Bids and Awards Committee  
 Mines and Geosciences Bureau RO V  
 Regional Center, Rawis, Legazpi City

Sir/Madam:

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

Unit	Item Description	Quantity	Unit Cost	Total Cost
bottle	Ammonium chloride, 200 g.	1		
bottle	Barium chloride, 200 g.	1		
bottle	Calcium carbonate, 200 g.	1		
bottle	Eriochrome Black T, 50 g.	1		
bottle	Ethanol, 2.4 li.	1		
bottle	Glycerine, 50 g.	1		
bottle	Hydrochloroplatinic acid (concentrated), 2.4	2		
bottle	Hydroxylamine hydrochloride, 50 g.	1		
bottle	Murexide, 50 g.	1		
bottle	Potassium cyanide, 50 g.	1		
bottle	Potassium dihydrogen phosphate, 50 g.	1		
bottle	Potassium hydrogen phthalate, 50 g.	1		
bottle	Sodium bicarbonate, 100 g.	1		
bottle	Sodium carbonate, 200 g.	1		
bottle	Sodium chloride, 200 g.	1		
bottle	Sodium hydroxide, 200 g.	1		
bottle	Sodium sulfate, 200 g.	1		
bottle	Sodium tetraborate decahydrate, 50 g.	1		
bottle	Thymolphthalexon indicator, 50 g.	1		
<b>GRAND TOTAL (Inclusive of VAT)</b>				

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Complete Address

Quoted by:

\_\_\_\_\_  
Printed Name and Signature

\_\_\_\_\_  
Tel. /Cellphone No. and email address

\_\_\_\_\_  
Date

Payment shall be made through Land Bank's LDDAP-ADA/Bank Transfer facility, after submission of Billing, required supporting documents and User Acceptance. Please note that the corresponding bank transfer fee, if any, shall be chargeable to the contractor's or creditor's account.

**Payment Details:**

Banking Institution: \_\_\_\_\_

Account Number : \_\_\_\_\_

Account Name : \_\_\_\_\_

Branch: \_\_\_\_\_