

Republic of the Philippines

OFFICE OF THE PRESIDENT

NATIONAL COMMISSION ON MUSLIM FILIPINOS

BIDS AND AWARDS COMMITTEE

REQUEST FOR QUOTATION

Title of the Project: CHANGE OIL OF HONDA WAVE 110 MOTORCYCLE #5						
RFQ No. 2018-074	Date: 14 August 2018	MOP: NP-Shopping				
Location: Metro Manila	Deadline: 21 August 2018 ABC: P750.00	End-user: ADMIN-GSD				

Sir/Madam:

Please quote your lowest price on the item/s listed below, subject to the following General conditions, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than the deadline by e-mail (ncmf.bac2016@gmail.com), fax (02-952-4875), or personal delivery.

DIMAPUNO A. DATU-RAMOS JR. A
Director and Chairman, BAC

Terms and Conditions:

- 1. Suppliers are required to submit their **PhilGEPS Platinum Registration (2-3 pages)**. PhilGEPS Red Members must also submit copy of their **Mayor's/Business Permit and Tax Registration**.
- 2. All entries must be typewritten/printed eligibly and without alterations. If there is any same shall be initialed by authorized personnel. Failure to use this form will result to disqualification of your bid.
- 3. Delivery period within FIVE (15) days from receipt of the P.O/Contract.
- 4. Late submission of quotation shall not be accepted.
- 5. Price validity shall be for a period of thirty (30) calendar days.
- 6. Award of contract shall be made to lowest quotation, and complies with the specifications and other terms and conditions stated in the RFQ.
- 7. The NCMF reserves the right to reject any or all bid proposals, or declares the bidding a failure, or not to award the contract, and makes no assurance that a contract shall be entered into as a result of this invitation.
- 8. Terms of payment shall be made through check payable to the supplier.
- 9. All quotations should be inclusive of VAT.

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Item No.	ITEM & DESCRIPTION	UNIT	QTY	Budget Allocation	Price Quotation
1	Motorcycle oil	Pc	1	250.00	
2	Change oil labor			150.00	
3	Headlight switch labor			350.00	

at prices noted above.	pied your	General Co	onaitions. I/\	ve quote yo	u on the item
Authorized Signature:	-				
Name and Title of Signatory:					

Company Name:

PhilGEPS No.:

Mayor's/Business Permit No.:

Tax Registration No.:

Contact No.:

Date Accomplished: