

Republic of the Philippines Department of Agriculture **PHILIPPINE FIBER INDUSTRY DEVELOPMENT AUTHORITY** Regional Office VII Mezzanine Floor, LDM Building, M.J. Cuenco Avenue corner Legaspi St., Cebu City **Email:** <u>rocebu@philfida.da.gov.ph</u>, Website: <u>www.philfida.da.gov.ph</u> Telephone No.: (032) 2561664/2539643

The Technical Assistance Unit of Philippine Fiber Industry Development Authority Regional Office VII (PhilFIDA RO VII) had requested for Supply and Delivery of Sisal Bulbils @ 2-3 inches long under Purchase Request Number 2025-06-317 dated June 18, 2025. Thus, the PhilFIDA RO VII, thru its Bids and Awards Committee (BAC) invites all suppliers and distributors to send their sealed bids/quotations, within seven (7) days from publication hereof, for the item enumerated below:

REQUEST FOR QUOTATION

Item No.	Name of Project	Approved Budget (P)
1	Supply and Delivery of Abaca Corm	180,000.00
	 Technical Specifications: Quantity: 30,000 pieces 2-3 Prominent eyebud Prefered Varieties: Bongolanon,Laob and Inosa Apparently healthy and free from any diseases To be delivered at PhilFIDA VII specified location: Brgy. Datagon Pamplona Negros Oriental: 20,000 pcs. Brgy. Pili, Danao City, Cebu : 5,000 pcs. Brgy. Sunog, Balamban, Cebu : 5,000 pcs. Note: Supplier must provide an additional (600pcs),2% of the quantities procured as mortality allowance. Delivery period: 30 Calendar days upon conforme of the Purchase Order. Payment term: Full payment upon completion of deliveries totaling 30,000 pieces, including the 2% mortality allowance, to the specified locations. 	
	TOTAL	180,000.00

Please quote your best offer for the item(s) listed. Submit your sealed quotation duly signed by you or your duly authorized representative not later than 9:00 AM on June 30, 2025. Award of contract shall be made to the lowest quotation which complies with the minimum description as stated in RFQ. A clear copy of your **2025 Mayor/Business Permit/Official Receipt, duly signed and notarized Omnibus Sworn Statement,** and **PhilGEPS Registration Number/Certificate** are also required to be submitted along with your sealed quotation. Quotations can be submitted manually at the address indicated below or emailed to rocebu@philfida.da.gov.ph.





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Philippine Fiber Industry Development Authority Mezzanine Floor, LDM Building M. J. Cuenco Avenue corner Legaspi Street Cebu City, Cebu

For clarification, you may contact Mr. Jeffrey D. Baldesco, BAC Secretariat at telephone numbers 032-2561664 and 032-2539643

HAD -JOSE DARY C. LOCSIN

JOSE BARY C. LOCSIN Chairperson, BAC Date: 06/23/2025





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INSTRUCTIONS:

- 1. Accomplish this RFQ correctly and accurately
- 2. Do not alter the contents of this form in any way
- 3. Technical specifications with asterisk (*) are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation
- 4. Failure to follow these instructions will disqualify your entire quotation

PR Number: 2025-06-317 Date: _____

JOSE DARY C. LOCSIN.

Chairperson, Bidding and Awards Committee PhilFIDA Regional Office VII Cebu City

Sir,

After having carefully read and accepted the terms and conditions in the Request for Quotation, hereunder is our quotation/s for the item/s as follows:

ltem Number	Name of Project	Contract Cost (P)
	Supply and Delivery of Abaca Corm	
1	Technical Specifications:Quantity: 30,000 pieces2-3 Prominent eyebudPrefered Varieties: Bongolanon,Laob and InosaApparently healthy and free from any diseasesTo be delivered at PhilFIDA VII specified location:Brgy. Datagon Pamplona Negros Oriental: 20,000 pcs.Brgy. Pili, Danao City, Cebu: 5,000 pcs.Brgy. Sunog, Balamban, Cebu: 5,000 pcs.Note: Supplier must provide an additional (600pcs),2% of	
	 <i>the quantities procured as mortality allowance.</i> Delivery period: 30 Calendar days upon conforme of the Purchase Order. Payment term: Full payment upon completion of 	
	deliveries totaling 30,000 pieces, including the 2% mortality allowance, to the specified locations.	



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The above quoted prices are inclusive of all costs and applicable taxes.

Very truly yours,

Name and signature of Representative

Name of Company

_____Address

Contact Number

