

Date: May 13, 2024

GENTLEMEN:

REQUEST FOR QUOTATION

Kindly quote to us your latest price(s) on the following item(s):

QTY	UNIT	ITEM/DESCRIPTION/SPECIFICATION	UNIT PRICE
1(One)	Unit	VAN HIRE/RENTAL	
		PROJECT NAME: TRANSPORTATION REQUIREMENT FOR INSPECTION, EVALUATION, AND PROCESSING OF ACCREDITATION OF TOURISM ESTABLISHMENTS	
		Objective: For the official use of DOT-NCR Tourism Regulation Division personnel	
		REQUIREMENTS/SPECIFICATIONS:	
		Date of Engagement: <ul style="list-style-type: none"> • May – June 2024 Scope of Service: <ul style="list-style-type: none"> • 1 (one) unit of air-conditioned MPV/AUV/Sedan • 12 hours use per day • Inclusive of: Driver, Driver's Meals, Fuels, Parking, Toll Fees, Driver's Fee • First Aid Kit On-Board • Preferably with Waze directional app • Itinerary within Metro Manila subject to change (May-June 2024) 	
		Documentary Requirements to be Submitted:	
		<ol style="list-style-type: none"> 1. Valid Mayor's / Business Permit 2. PHILGEPS Registration Number 3. Valid DOT Accreditation Certificate 4. Omnibus Sworn Statement 	
		APPROVED BUDGET FOR THE CONTRACT (ABC) PhP 117,00.00 Pesos : One Hundred Seventeen Thousand Only <small>* inclusive of all applicable taxes, EVAT/VAT/government taxes/service charge/and other applicable taxes and charges net upon completion of the project and delivery of all requirements as agreed upon. Government procedure and subject to appropriate government taxes</small>	
		CONTACT PERSON: KIM DARRYL L. MENOR - kdlmenor@tourism.gov.ph	
		Please quote your lowest price for the above requirements and submit your quotation along with documentary requirements VIA PERSONAL SERVICE AND/ OR COURIER in three (3) original sets IN A SEALED ENVELOPE to this office address: DOT NCR BAC SECRETARIAT Mr. Lawrence J. Alcantara – Head, NCR BAC Secretariat 7840 Makati Avenue, Poblacion, Makati City	
		Note: Deadline of submission is on May 21, 2024 at 08:00 am	

This office desires to place an order for the above item(s) with the minimum delay. Your firm quotation will help us very much in placing the order.

Thank you.

PRINT NAME OF DEALER/SUPPLIER

ADDRESS OF DEALER/SUPPLIER

CONTACT NUMBER(s)

TIN: _____

LANDBANK ACCOUNT NUMBER

AUTHORIZED SIGNATURE OVER PRINT NAME