

PLEASE USE THIS FORM. DO NOT RETYPE OR ALTER

Annex A

TECHNICAL PROPOSAL FORM

Item No.	Description	Qty	Minimum Technical Specifications Unless Otherwise Specified
1.	Meals x 4 days 10 % Service Charge Other Condition : 1. The Service Provider must be in the catering/restaurant/food business for the 3 years 2. The Service Provider is as existing caterer of DENR 3. The Service Provider must use eco-friendly packaging materials	80 pax	Breakfast AM Snack Lunch PM Snack Dinner

Project Requirements/Terms and Conditions:

- 1) **Delivery/completion** period: Within **thirty (30) calendars days** from receipt of Notice to Proceed.
- 2) **Delivery Site:** Materials Handling Section, Basement, DENR Main Building, Visayas Ave., Diliman, Quezon City
- 3) **Replacement of Defective Items:** Within Fifteen (15) Calendar Days upon receipt of Notice of Defects from DENR.
- 4) **Warranty: One (1) Year** from issuance of Certificate of Inspection and Acceptance.
- 5) Payment shall be made in accordance with the Terms and Conditions of the Contract.
- 6) **Liquidated Damages (LD)** equivalent to one tenth of one percent (0.1%) of the value of contract not delivered within the prescribed period shall be imposed per day of delay. The DENR may rescind the Contract once the cumulative amount of LD reaches 10% of the amount of the Contract, without prejudice to other courses of action and remedies open to it.

**FINANCIAL QUOTATION FORM
(PRICE MUST BE VAT INCLUSIVE)**

Item No.	DESCRIPTION	QTY	ABC PRICE (₱)	TOTAL BIDDER'S PRICE QUOTATION (₱)
1	Meal x 4 days 10 % Service Charge	80 pax	246,400.00	
GRAND TOTAL				

BIDDER'S UNDERTAKING

I/We, the undersigned Supplier, after having examined the Technical Specifications/ Project Requirements, hereby OFFER to supply/deliver/perform the above described items.

I/We undertake, if our proposal is accepted, to deliver the items/services in accordance with the terms and conditions contained in the Request for Quotation.

Until a formal Contract is prepared and signed, this quotation is binding on us.

NAME OF COMPANY (IN PRINT)

SIGNATURE OVER PRINTED NAME OF THE AUTHORIZED REPRESENTATIVE

ADDRESS:

Designation:

Date:

Email Address:

Telefax No.:

Mobile

Number:

