

## Republic of the Philippines

## DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

## ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE Ipil, Zamboanga Sibugay, Region IX

Name of Procuring Entity		: DPWH-Zamboanga Sibugay 2nd DEO	EO Request for Quotation (P.R. No.)					
Revised on :				Date	e:	November 07, 2	024	
Standard Form/Title		REQUEST FOR QUOTATION  24GJF0396 - Expansion Bolt for use in the Installation of Delineator along Pangi-Lapaz Road Section, this district  Office/End-User			er :	Maintenance Section		
COM	IPANY NAME :				•			
COIV	ADDRESS :							
TEI	NO./FAX No. :				TIN:			
Please qu	uote your lowest	price on the item(s) listed below, subject to the 0:00 A.M. of <u>November 15, 2024</u> in the report of the price	Terms and Conditions sturn envelope attached	stated belo	ow and submit o the Goods &	your quotation duly Services Division, Pr	signed by your ocurement Unit,	
TERMS and CONDITIONS:  1. All entries must be typewritten or legibly written. 2. Delivery period within 8 days upon receipt of the approved further Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9 delivery without valid reason. 3. Price validity shall be for a period of sixty (60) calendar days. 4. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon stability. Billiam of the sixty of the product. 5. Bidders shall submit original brochures of the product. 6. Please indicate the brand for each items being offered. 7. The approved budget ceiling for this procurement is P 14,000.00			i be imposea for non-	RYAN VERGEL C. BUAC Engineer - III Chief, Planning & Design Section BAC Charperson				
Item		Expanded Folder		QTY.	UNIT	UNIT PRICE	TOTAL PRICE	
No.	Evennien Pol			400	pieces			
-	Expansion Bol	L .			•			
	X-X-X-X							
,								
							-	
							-	
Brand Name and Model : Warranty				:			_	
Delivery Period : 8 days Pri					None		-	
After h Delivery F	aving carefully Period, Warran	y read and accepted your General Conditi ty and Price Validity are left blank, it mea	ions, I / We quote yons that I concur with	ou on the n the Ter	titem(s) at proms and Cond	ices note above. litions specified b	If the space for y DPWH.	
	Tel. No.	957-3446		Printed Name / Signature / Date				
					Tel. No. /	Cellphone No. / E-	maii Address	