

Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE

Lower Ipil Heights, Ipil, Zamboanga Sibugay, Region IX '

Name of Procuring Entity : DPWH-Zamboanga Sibugay 2nd DEO Request for Quotation (P.R. No.) 2025-04-122 Revised on Date April 03, 2025 REQUEST FOR QUOTATION Standard Form/Title 25GJF0120 - Transfer/Installation of 1 unit Inverter, Office/End-User Supply Unit (Floor Mounted Type Aircondition) for use in the District Engineer's Office, this district COMPANY NAME **ADDRESS** TEL. NO./FAX No. TIN: Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated below and submit your quotation duly signed by your representative not later than 10:00 A.M. of April 10, 2025 in the return envelope attached herewith, to the Goods & Services Division, Procurement Unit, Zamboanga Sibugay 2nd DEO, Tirso Babiera, Ipil, Zamboanga Sibugay. TERMS and CONDITIONS: 1. All entries must be typewritten or legibly written. Delivery period within 7 days upon receipt of the approved funded Purchase Order (P.O).
Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for nondelivery 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 submission of the quotation. 5. Biddlers 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 \$,500.00 Item **ITEMS & DESCRIPTION** QTY. UNIT **UNIT PRICE** TOTAL PRICE Transfer/Installation of 1 unit Inverter, R410A Floor Mounted Type Aircondition 1 umit **Brand Name and Model** Warranty. **Delivery Period** 7 days Price Validity : None After having carefully read and accepted your General Conditions, I / We quote you on the item(s) at prices note above. If the space for Delivery Period, Warranty and Price Validity are left blank, it means that I concur with the Terms and Conditions specified by DPWH. Tel. No. 957-3446 Printed Name / Signature / Date Tel. No. / Cellphone No. / E-mail Address