

Mancarogo, Bislig City

Request for Quotation (P.R. No.) : 2025-04-058

Revised on

Date : April 1, 2025

Standard Form/Title

REQUEST FOR QUOTATION

Office/End-User : Quality Assurance Section

COMPANY NAME :

ADDRESS :

T.I.N. No.

Tel. No./Fax No. :

Please quote your lowest price on the Item(s) listed below, subject to the Terms and Condition stated below and submit your quotation duly signed by your representative not later than 2:00 P.M. of C 8 MAY 2025 in the return envelope attached herewith, to the BAC Secretariat, DPWH, Bslig City.

TERMS AND CONDITIONS:

1. All entries must be typewritten or legibly written.
2. Delivery period within ten (10) w.d. 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 non-delivery without valid reason.
3. Warranty shall be for a minimum of three (3) months for supplies & materials; one year for Equipment from date of acceptance by the end-user.
4. Price validity shall be for a period of one hundred twenty (120) calendar days.
5. G.EPS Registration Certificate shall be attached upon submission of the quotation.
6. Bidders submit original brochure showing certifications of the product, If applicable.
7. Please indicate the brand for each items being offered.

The approved budget ceiling for this procurement is P 164,750.00

Purpose : for use in the Quality Assurance Section Laboratory/Office Equipment for the 2nd quarter PPMP CY-2025

Brand and Model :	_____	Warranty :	_____
Delivery Period :	_____	Price Validity :	_____

After having carefully read and accepted your General Conditions, I/We quote you on the item(s) at prices
note above.

Printed Name/Signature/Date

Tel. No./Cellphone No./E-Mail Address