Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
**ZAMBOANGA SIBUGAY**
**2nd DISTRICT ENGINEERING OFFICE**
Ipil, Zamboanga Sibugay

BAGONG PILIPINAS

Name of Procuring Entity : DPWH-Zamboanga Sibugay 2nd DEO  Request for Quotation (P.R. No.) :

Revised on :  Date : April 12, 2024

## REQUEST FOR QUOTATION

| | | | |
|---|---|---|---|
| Standard Form/Title : | **24GJF0109** - Split Type Installation with Material, Labor & excess pipe to be use of Planning & Design Section, 2ND District Engineering Office, Ipil, Zamboanga Sibugay, this district | Office/End-User : | Planning & Design Section |

| | | | |
|---|---|---|---|
| **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 _____ 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.*
*2. Delivery period within _____ 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 mininum of three (3) months for supplies & materials; one year for Equipment; 3 years IT Equipment from date of acceptance by the end-user.*
*4. Price validity shall be for a period of sixty (60) calendar days.*
*5. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon submission of the quotation.*
*6. Bidders shall submit original brochures of the product .*
*7. Please indicate the brand for each items being offered.*
*8. The approved budget ceiling for this procurement is* ***P 14,700.00***

REYNALDO L. GRESOS
Engineer - III
Chief, Quality Assurance Section
BAC Vice Chairperson

| Item No. | ITEMS & DESCRIPTION | QTY. | UNIT | UNIT PRICE | TOTAL PRICE |
|---|---|---|---|---|---|
| 1 | Floor Mounted Installation with Material, Labor & excess pipe | 1 | unit | | |
| | x-x-x-x-x | | | | |

**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. 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*