

## Republic of the Philippines

## DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS **REGIONAL OFFICE II**



Dalan na Pavvurulun, RGC, Carig Sur, Tuguegarao City, Cagayan

Procuring Entity : DPWH –			- Regional Office II		RFQ No.	:	: <u>2024-11-119</u>		
Standar	d Form/Title	: REQUEST FOR QUOTATION			Date		November 29, 2	2024	
Revised on :					Office/End Use	er Unit :	Administrative [		
	NY NAME	. ———							
ADDRES		:							
	T NUMBER								
	I NUMBER	·							
T.I.N.		:							
signed	by your repre	sentative not la	ter than 10:0		. 3, 2024 , in	a sealed	envelope to th	abmit your quotation duly be Procurement Staff,	
			sity, cagayan	and viii be opene	d on the same d	27 dc <u></u>	·		
	TERMS and CONDITIONS:								
1. All entries must be type written or legibly written.									
2. Delivery period within 30 calendar days upon receipt of the approved funded Purchase Order.  Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA9184 shall be imposed for non-									
delivery without valid reason.									
3. Warranty shall be for a minimum of three (3) months for supplies and materials; One (1) year for BERNARD ISSALABAZARON									
Facilities and form data of accordance by the and con-									
4 Price Validity shall be for a period of 30 calendar days									
5. Documentary Requirements shall be attached upon submission of the quotation.  BAC Chairperson									
6. All items shall be procured as "One Lot"									
7. Liquidated Damages pursuant to Sec. 68 of the Revised IRR-RA9184 shall be imposed for non-									
delivery without valid reason.									
8. Performance Bond: Yes; No									
10. You may submit your Ouotation and Requirements through									
10. You may submit your Quotation and Requirements through casem.hilario@dpwh.gov.ph/procurement.dpwhro2@gmail.com									
Approved Budget Ceiling: P540,000.00									
Mode of Procurement: Small Value Procurement									
	Plode of Proce	dienient. Sinai	value Procui		Doguisamente				
		Anyor's Dormit :		Documentary		No. or Do	a Cartificate		
Mayor's Permit : /					PhilGEPS Reg.				
DTI/SEC: /				/	Incom	/			
_	Tax Clearai	nce Certificate :		/	Om	nibus Swoi	rn Statement :		
Item No.	It	tem Description		Brand & Mod	el Quantity	Unit	Unit Cost	Total Cost	
	Photocopier w	copier with ARDF							
1	(see attached	ree attached specifications requirement)			2	unit			
	x-x-x-x								
		0.55				-	-		
		Office of the Ad	ministrative						
	Division								
							TOTAL		
Delivery Period : Price Validity :									
Warrar	ity :								
After h	aving carefully	read and accept	ed your Gene	ral Conditions, I	We quote you o	n the item	at prices noted	d 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 Regional Office II.									
Region	ai Office II.								
		Nar	ne & Signatur	e of Supplier:					
Name & Signature of Supplier:									
			Con	tact Number:					
				_					

Website: https://www.dpwh.gov.ph
Tel. No.: (078)-304-7724

