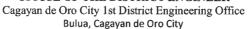


Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

Region X

OFFICE OF THE DISTRICT ENGINEER





Name of Procuring Entity: CDO 1st DEO Request for Quotation (P.R. No. 2025-02-027): 2025-03-012 Revised on: Date: March 7, 2025 Standard Form/Title: **REQUEST FOR QUOTATION** Office/End-User: Office of the District Engineer **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 on MARCH 11, 2025 until 2:00 p.m., to the office of the BAC Secretariat/Procurement Unit, 10th RES Compund, Bulua, Cagayan de Oro City. TERMS and CONDITIONS: 1. All entries must be typewritten or legibly written. 2. Delivery period within thirty (30) c.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. ELVIRO S. SALIGUMBA Chief, Quality Assurance Section BAC- Chairperson 4. Price validity shall be for a period of sixty (60) calendar days. 5. Phil-GEPS Registration Certificate, the following documents must be updated: Mayor's Business Permit, DTI, Income/ Business Tax Return, Tax Clearance and Omnibus Sworn Statement (DPWH-G&S-18) shall be attached upon submission of the quotation. 6. Bidders shall submit original brochures showing certifications of the product, if applicable. 7. Please indicate the brand for each items being offered. The awarding for this RFQ will be on a lump-sum basis. Prospective Suppliers must quote for all of the items. Otherwise they will be subjected for disqualification. 8. The approved budget ceiling for this procurement is Php 132,924.00 9. Submission of RFQ thru e-mail/courier shall not be entertained. 10. Bids must be submitted by the Proprietor/ Authorized Representative together with his original Special Power of Attorney (SPA) and valid ID. Item **ITEMS & DESCRIPTION** QTY. UNIT **UNIT PRICE TOTAL PRICE** No 1 Elevator Preventive Maintenance 12 mo. X-X-X-X-X-X-X-X-X-X-X-X-X Purpose: For the use of preventive maintenance of the elevator of the main building of this office Brand and Model: Warranty: Delivery Period: Price Validity: After having carefully read and accepted your General Conditions, I / We quote you in 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. BAC-Secretariat: Printed Name/Signature/Date Tel. No. 880-0177 Local 74619

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