

Name of Procuring Entity: DPWH Bulacan 2nd D.E.O., Sta. Maria, Bulacan

Request for Quotation (P.R. No.) : 25-03-0010 (PR# 25-02-0022)

Revised on:

Date : March 11, 2025

Standard Form/Title:

## REQUEST FOR QUOTATION

Office/End User : Maintenance Section

**COMPANY NAME** :

<b>ADDRESS</b>	:
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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 March 17, 2025 in the returned envelope attached herewith, to the BAC Secretariat, Pulong Buhangin, Santa Maria, Bulacan.

**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 minimum 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/Latest ITR/Omnibus Sworn Statement shall be attached upon submission of the quotation.
6. Bidders shall submit original brochures showing certifications of the product.
7. Please indicate the brand for each item being offered.
8. The approved budget ceiling for this procurement is \_\_\_\_\_.

**P998.203.50**

**ACE M. CAPER**  
BAC Chairman

[illegible]

Brand and Model	:		Warranty	:	
Delivery Period	:		Delivery Period	:	

*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.*

Telefax: 044-328-0347  
c/o John Richard V. Maghinang  
[dawhbulacan2nd@gmail.com](mailto:dawhbulacan2nd@gmail.com)

Printed Name / Signature / Date

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