|  | DEPARTMENT OF PU   | c of the Philipp<br>BLIC WORKS  | S AND HIGH                       | WAYS  | SPIRE                        |
|--|--|---|----------------------------------|---|------------------------------|
| Nama of  | Engineers' Hill, E   |   | n de Oro City                    | BAU   |                              |
| Revised of   | Procuring Entity:  |   | Date:                            | or Quotation (P.R<br>November 8, 20                             |                              |
| Standard   | Form/Title: REQUEST FOR QUOTATION  | N   |                                  | d-User: MAINTEN   |                              |
| ADDRE  | NY NAME:<br>SS:<br>J./FAX NO.:   |   |                                  | TIN:  |                              |
| Pleast<br>your quo<br>herewith<br>Oro City<br><b>TERMS</b><br>1. All entri<br>2. Delivery<br>Purchas<br>IRR-RA<br>3. Warran<br>Equipmen<br>4. Price va<br>5. Attach 6<br><b>Statemer</b><br>6. The App<br>7. RFQ mu,<br>8. Bidders | e quote your lowest price on the item(s) listed below,<br>otation duly signed by your representative not later the<br>, to the BAC Secretariat, 2nd Floor Administration Bu<br><b>and CONDITIONS:</b><br>es must be typewritten or legibly written.<br>period within <u>thirty (30)</u> c.d. upon receipt of the approved fund<br>e Order (P.O.) Administrative penalties pursuant to Sec. 69 of the I<br>9184 shall be imposed for non-delivery without valid reason.<br>ty shall be for a minimum of three (3) months for supplies & mater<br>throm date of acceptance by the end-user.<br>Leitfied True Copy of PhilGeps Registration Number, Mayor's Permi<br>It ( <b>if ABC</b> is above SOK), <b>Income/Business Tax Return if AB</b><br>proved budget ceiling for this procurement is <b>Php 995,626.23</b><br>is be signed by an authorized signatory.<br>shall submit original brochures of the product (if applicable) | ed<br>Revised<br>ials; one (1) ye<br>t and <b>Omnibus</b><br>C <b>s above P50</b> | ar for                           | ffice X, Engineers<br>VIRGIE G.<br>Chief, Constr                | VAYVE,<br>uction Divinairman |
| <ol><li>Please i</li></ol>   | ndicate the brand for each items being offered.<br>s shall submit sealed quotation.  |   | L.                               |   |                              |
| Item   | ITEMS & DESCRIPTION  | QTY.  | UNIT                             |   | тота                         |
| No.  | 4.5mm Fiber Cement Board/ Hardiflex Board  | 22  |                                  |   | P                            |
|  | Metal Studs 2"x3"x10'  | 35  | sheets<br>pcs                    | <u> </u>  | r                            |
| CM-R-04(   |  | 12  | box                              |   |                              |
|  | Hardi Screw  | 8   | box                              | 1   |                              |
|  | Ceramic Glazed Tiles (80cm x 80cm)   | 315   | pcs                              |   |                              |
|  | Ceramic Glazed Tiles (60cm x 60cm)   | 535   | pcs                              |   |                              |
|  | Cement Portland  | 250   | bags                             |   |                              |
|  | Fine Aggregate   | 40  | cu.m.                            | ļ   |                              |
|  | Tile Adhesive  | 352   | bags                             |   | ļ                            |
|  | Tile Grout   | 50  | bags                             | ļ   | ļ                            |
|  | Diamond Cutting Disc #4  | 40  | pcs                              | ļ   |                              |
|  | Concrete Neutralizer   | 50  | gals                             |   | ļ                            |
|  | Paint Primer Solvent<br>Glazing Putty  | 50<br>50  | gals                             |   |                              |
|  | Paint Latex Semi-Gloss (Skyblue)   | 90  | gals                             |   |                              |
|  | Paint Brush #4   | 40  | gals                             |   |                              |
|  | Paint Blush #4   | 35  | pcs<br>pcs                       |   |                              |
|  | Paint Tray   | 30  | pcs                              |   |                              |
|  | Fiber Glass Mesh Self-Adhesive Tape (48mmx90m)   | 43  | rolls                            |   |                              |
|  | Masking Tape 1"  | 32  | rolls                            |   |                              |
|  | Sand Paper #150  | 50  | pads                             | <u> </u>  |                              |
|  | Sand Paper #240  | 50  | pads                             |   |                              |
|  | Sand Paper #1000   | 50  | pads                             |   |                              |
|  | -&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&  |   |                                  |   |                              |
|  | TOTAL AMOUNT   |   |                                  |   | Р                            |
|  | Please write total amount in words   |   |                                  |   |                              |
|  | · · · · · · · · · · · · · · · · · · ·  |   |                                  |   |                              |
|  |  |   | l                                | ļ   |                              |
|  | ······································   |   |                                  |   |                              |
|  | Diance energify hand name if and include   |   |                                  |   |                              |
| PURPOS   | Please specify brand name, if applicable.<br>E: Supply and Installation of Floor Tiles, Painting & Pa  | rtition \/allie   | l<br>In at Main P                | L   | nance Div                    |
| Administra<br>Canteen.   | ative Division), Main Building 1 (Commission on Audit  | Office), Reg  | ion X-Chape                      | & DPWH Multi-P  | urpose Co                    |
|  | d Model:   |   | Warranty:                        |   |                              |
| Aft  | er having carefully read and accepted your Gen<br>note above. If the space for Delivery Period, v<br>concur with the Terms and Conditions specifie<br>BAC-Secretariat:   | Narranty a  | tions, I / W<br>nd Price Va<br>I | ty:<br>/e quote you in<br>ilidity are left b<br>nted Name/Signa | the item<br>lank, it n       |
|  | Tel. No. 853-2012  |   |                                  |   |                              |
|  | Fax No. 853-2012   |   |                                  | ./Cellphone No./E   |                              |

