

**Department of Public Works and Highways (DPWH)**

**Contract ID:**

**Contract Name:**

**Location of the Contract:**

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**CREDIT LINE COMMITMENT**

Date: \_\_\_\_\_

*Name of the Head of the Procuring Entity*

*Name of the Procuring Entity*

*Address of the Procuring Entity*

CONTRACT NAME : \_\_\_\_\_

COMPANY/FIRM : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

\_\_\_\_\_

BANK/FINANCING INSTITUTION : \_\_\_\_\_

ADDRESS : \_\_\_\_\_

\_\_\_\_\_

AMOUNT : \_\_\_\_\_

This is to certify that the above Bank/Financing Institution with business address indicated above, commits to provide the Contractor, if awarded the above-mentioned Contract, a credit line in the amount specified above which shall be exclusively used to finance the performance of the above-mentioned Contract, subject to our terms, conditions and requirements.

The credit line shall be available within fifteen (15) calendar days after receipt by the Contractor of the Notice of Award and such line of credit shall be maintained until the project is completed by the Contractor.

This Certification is being issued in favor of said Contractor in connection with the bidding requirement of \_\_\_\_\_ for the above-mentioned Contract.

*Name of the Procuring Entity*

We are aware that any false statements issued by us make us liable for perjury.

Name and Signature of Authorized Financing Institution Officer : \_\_\_\_\_

Official Designation : \_\_\_\_\_

Concurred By:

Name & Signature of Contractor's Authorized Representative : \_\_\_\_\_

Official Designation : \_\_\_\_\_

*Note:*

*The amount committed should be machine validated.*

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ACKNOWLEDGMENT

SUBSCRIBED AND SWORN to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
affiant exhibited to me his/her Community Tax Certificate No. \_\_\_\_\_ issued on  
\_\_\_\_\_ at \_\_\_\_\_, Philippines.

Notary Public  
Until 31 December 20\_\_\_\_  
PTR No. \_\_\_\_\_  
Issued at: \_\_\_\_\_  
Issued on: \_\_\_\_\_  
TIN No. \_\_\_\_\_

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of \_\_\_\_\_.