	CA		Republic o RTMENT OF PUBL ORO CITY 2ND				FICE	
			Macabalan, C	agayan de Oro C	ity			
Name of Procuring Entity		:		Re	quest for (Quotation (PR	No.): 2024-09-0	259
Revised on :							Date : September	20, 2024
Standard Form/Title	:	REQUES	ST FOR QUOTATION	<u>N</u>			User: ODE	
COMPANY						Carrie of the Control	SEPS No.	
	RESS:			- 12 000080000		TCC		
☼ TEL. NO./FA	AX NO. J.					TIN :		
	20 27 37		MALL VALUE PRO					
Please quote your lowest price requirements duly signed by yo	inclusive o	f VAT on the iter entative not later	n/s listed below, subject than 10:00 A.M. of	to the Terms and	Conditions	of this RFQ, an Procurement	d submit your sealed of Unit, Conference Room	uotation and other , DPWH 2nd DEO
Please observe proper sealing a BAC Chairman & bear a warning following requirements.	and markin g " DO NO	g of bids. All env T OPEN BEFOR	elopes must contain the RE date and time for the	RFQ number and ne opening. No bid	name to be is shall be s	bid, name and submitted throu	l address of the bidder a gh email. Sealed quotai	and address to the tion must meet the
TERMS and CONDITIONS:							-	
1. All entries must be typewritten	or legibly	written.					$M \sim 10^{-1}$	1
2. Delivery period within <u>15</u> <u>Cl</u> pursuant to Sec. 69 of the Rev	<u>D</u> upon red ised IRR-F	ceipt of the appro PA 9184 shall be	oved funded Purchase (imposed for non-delivery	Order (P.O). Admir without valid reas	nistrative pe on.	enalties	NOR B. ALF	ex.
3. Warranty must be submitted conditions and terms of warranty		tance by the pro	curing entity of the delive	red supplies in the	following		BAC Chairn	
Expendable Supplies (cons Non-Expandable Supplies (IT Equipment (Computer, P	(serviceabl	e in more than or				- 3 MONT	· ·	
4. Price validity shall be for a p			davs.			- 3 YEARS	į	
5. PhilGEPS Registration /Mayor	r's Permit/L	OTI, Income Tax	Return and Tax Cleara	nce Certificate and	d Omnibus :	Sworn Stateme	nt shall be attached upo	n submission of
quotation . 6. Bidders shall submit original b	rochures o	f the product						
7. Please indicate the "BRAND			ems being offered.					
8. The approved budget ceiling (ABC) for ti	nis procurement i	s P 124,000.00					
9. The awarding for this RFQ will	i be on a lu	mp-sum basis. P	rospective Suppliers mu	st quote for all of th	ne items, otl	herwise they wi	ll be subjected for disqu	alification.
10. Supplier must have an officia	ıl store regi	stered establishr	nent- Geotagged Photos	of Actual Store of	Supplier (O	utside and Insid	de) must submit along w	ith their quotation
Item No.	IT	EMS & DES	CRIPTION		QTY.	UNIT	UNIT PRICE	TOTAL PRICE
			nolstered, Losse Cushi Leg Dimension: appro		1	unit		

Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
	Sofa (Three-Seater) Color Black, fabric upholstered, Losse Cushion on Rubber Foam with non-sag spring, Stainless Steel, Leg Dimension: approx. 210 x600x800 mm	1	unit		
	Sofa (Three-Seater) Color Black, fabric upholstered, Losse Cushion on Rubber Foam with non-sag spring, Stainless Steel, Leg Dimension: approx. 210 x600x800 mm	4	unit		
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
	xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx				
			· ************************************		
rand an	d Model : Warranty	<u>. </u>			
elivery F					-
	1 not valually	* -			-

Printed Name / Signature / Date

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