


Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
SORSOGON FIRST DISTRICT ENGINEERING OFFICE
REGIONAL OFFICE V
Guinlaon, Sorsogon City

Name of Procuring Entity	: DPWH Sorsogon 1st DEO	Request for Quotation (P.R. No.)	: 2024-04-0031
Revised on :		Date	: 4/3/24
Standard Form/Title	: REQUEST FOR QUOTATION	Office/End-User	: Maintenance Section
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 not later than 2:00 P.M. on 10 APR 2024 in the return envelope attached herewith, to the **Procurement Unit, DPWH Sorsogon 1st DEO, Guinlaon, Sorsogon City.**

TERMS and CONDITIONS :

1. All entries must be typewritten or legibly written.
2. Delivery period within **Thirty (30) calendar days** 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 for IT Equipment** from date of acceptance by the end-user.
4. Price validity shall be for a period of **sixty (60) calendar days**.
5. For all Supplier, the two (2) envelope system will be followed.
- The first envelope shall contain the following eligibility document/s.
PhilGEPS Registration Certificate (Platinum), Mayor's Permit, DTI/SEC Registration, Tax Clearance including Income/Business Tax Return, Certificate of Registration, Omnibus Sworn Statement (not applicable for ABC < Php 50,000.00) and original brochures showing certifications of the product (if applicable) shall be attached upon submission of the quotation.
- The second envelope which contain the quotation shall only be opened after the first envelope is declared complying.
6. Bidders shall **submit original brochures** of the product .
7. Please indicate the **brand for each items** being offered.
8. The approved budget ceiling for this procurement is **P 520,000.00**
9. Please **specify brand name** otherwise, bids will not be accepted.
10. **Quotation thru electronic mail/fax will not be accepted.**


LARRY B. REYES
Administrative Officer V
BAC-Vice Chairman

Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
Purchase Request of Aggregate Base Course and Sand for use in Repair of Low Shoulders and Potholes along various National Roads (2nd Quarter), DPWH Sorsogon 1st DEO					
1.	Aggregate Base Course	500	cu.m		
2.	Sand	300	cu.m		
Purpose: For use in Repair of Low Shoulders and Potholes along various National Roads, (2nd Quarter), DPWH Sorsogon 1st DEO					
Note: Provide Certification or Test Report that ascertain Quality Control prior to bulk delivery and acceptance of the goods/product					
		Total -----			
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.		Amount in Words -----			

Brand and Model	:	_____	Warranty	:	_____
Delivery Period	:	_____	Price Validity	:	_____

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.

Printed Name / Signature / Date

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

CHECKLIST FOR GOOD'S

(Mode of Procurement: SMALL VALUE PROCUREMENT)

Attachment :

1. DTI Business Name/SEC Registration of Supplier
2. TAX Clearance & Monthly Payment of Taxes including Income/Business Tax Return
3. Certificate of PHILGEPS Registration
4. Latest/Updated Mayor's/Business Permit
5. Certificate of Registration (COR)
6. Omnibus Sworn Statement (Revised per GPPB Resolution No. 16-2020)
7. Bidders shall submit original brochures showing certifications of the product (if applicable)
8. Special Power of Attorney of Liaison and Valid Identification Card (if applicable)

Note: Please indicate the brand for each items being offered (if applicable)

Supplier's Signature