



Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
REGIONAL OFFICE XIII
J. Rosales Avenue, Butuan City

Name of Procuring Entity : DPWH R.O. XIII, Butuan City Request for Quotation (P.R. No.): 24-09-370
Revised on : Date : September 05, 2024 ABC: Php 551,261.50
Standard Form/Title : REQUEST FOR QUOTATION Office /End-user : Office of the Regional Director

COMPANY NAME :

ADDRESS :

TEL. NO./FAX NO. :

TIN :

Please submit your quotation for the item/s listed below, subject to the Terms and Conditions hereof, which may be submitted in person or thru registered mail not later than 10:00 A.M. of **SEP 13 2024** in a sealed or open envelope duly signed by the firm's owner or authorized representative, to the BAC Secretariat for Goods, DPWH Regional Office XIII, J. Rosales Avenue, Butuan City.

TERMS and CONDITIONS:

- All entries must be typewritten or legibly written.
- Delivery period within 60 Cal. Days upon receipt of the approved funded Purchase Order (PO) Administrative penalties pursuant to Sec.69 of the Revised IRR-RA 9184 shall be imposed for non-delivery without valid reason.
- Warranty shall be for a minimum of three (3) months for supplies & materials; one (1) year for Equipment; three (3) years for IT equipment from date of acceptance by the end user.
- Price validity shall be for a period of sixty (60) calendar days.
- PhilGEPS Registration Number, certified true copy of Mayor's Permit and DTI or SEC shall be attached upon submission of the quotation.
- Certified true copy of Income/Business Tax Return for ABC Php500K & above and Notarized Omnibus Sworn of Statement for ABC Php50K & above shall be submitted before the award of Purchase Order (PO) for Small Value Procurement (Sect. 53.9 of the Revised IRR-RA9184).
- The DPWH reserves the right to accept or reject any bid, to annul the bidding process, and to reject all bids at any time prior to contract award without thereby incurring any liability to the affected bidder.


JOEY D. GINGANE

Chief, Administrative Division
BAC-Chairperson

1st extension : _____
2nd extension : _____
3rd extension : _____

The awarding for this RFQ will be on a lump-sum basis. Prospective Suppliers must quote for all the items. Otherwise they will be subjected for disqualification.

ITEM No.	ITEMS AND DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
	Additional Customized Modular Partition for Regional Director's Office				
1	P120120LG (Half Glass-Half Laminated Partition)	1	pc		
2	P12080LG (Half Glass-Half Laminated Partition)	3	pc		
3	P12060LG (Half Glass-Half Laminated Partition)	2	pc		
4	PT-80P-table top	1	pc		
5	PC-126A-table top	1	pc		
6	PC-86A- table top	1	pc		
	Additional Customized Modular Partition for Assistant Regional Director's Office				
7	P9080L (Full Laminated Partition)	4	pc		
8	P9070L (Full Laminated Partition)	2	pc		
9	P9050L (Full Laminated Partition)	2	pc		
10	P9060L (Full Laminated Partition)	3	pc		
11	PT-80P-table top	2	pc		
12	PC-76A- table top	2	pc		
13	PC-56A- table top	2	pc		
14	clerical Chair	2	pc		
15	Mobile Pedestal	2	pc		
	Various Furnitures for Assistant Regional Director's office				
16	2-seater Couch	2	pc		
17	4-seater Dining table with chair	1	set		
18	Ceiling Fan	1	set		
19	Conference Chair (sled type)	10	pc		
20	Conference Table (dimension: w-300cm x d-120cmxh-75cm)	1	pc		
21	Executive Conference chair (black leather)	1	pc		
22	Lateral Filing Cabinet	2	pc		
23	Delivery charge	1	lot		

Purpose: Supply, Delivery & Installation Modukar Partition & Various Furnitures to be used at Regional Director's & Assistant Regional Director's Office

Please specify brand names & model, if applicable.

Brand : _____

Warranty : _____

Model : _____

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 Term and Conditions specified by DPWH.

Tel. No.: 975-9174

Telefax No.: 975-9174
c/o Procurement Staff
email: bac_r13@dpwhnet.gov.ph

Signature over Printed Name / Date

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