

Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE

Ipil, Zamboanga Sibugay



| | | y : DPWH-Zamboanga Sibugay 2nd DEO | Request for Quotation | (P.R. No. |) ; | | | |
|---|----------------------|---|---|---|-----------------------------|--|--|--|
| Revise | a on : | | | Dat | e ; | April 12, 20 | 24 | |
| Standard Form/Title | | REQUEST FOR QUOTATION 24GJF0126 - Battery Amaron for use of the Commission on Audit Vehicle (KAG-7178) Toyota Hilux, this district | | e/End-Use | -User Finance Section | | ion | |
| CO | MPANY NAME | | | | : | | | |
| - 00 | ADDRESS : | | | | | | ~ | |
| TEL. NO./FAX No. : | | | | | TIN: | | | |
| represe | ntative not later th | est price on the item(s) listed below, subject to the lan 10:00 A.M. of in the return DEO, Tirso Babiera, Ipil, Zamboanga Sibugay | e Terms and Conditions rn envelope attached he | s stated be erewith, to | low and subm the Goods 8 | nit your quotation dul Services Division, F | ly signed by your Procurement Unit, | |
| TERMS and CONDITIONS : | | | | | | 1 | | |
| 1. All entries must be typewritten or legibly written. 2. Delivery period within upon receipt of the app. (P.O). Administrative penalties pursuant to Sec. 69 of the Revised non-delivery without valid reason. 3. Warranty shall be for a mininum of three (3) months for supplies of 3 years IT Equipment from date of acceptance by the end-user. 4. Price validity shall be for a period of sixty (60) calendar days. 5. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon the 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 | | | 0184 shall be imposed 160 | REYNALDOW. GRESOS ne year for Equipment; Chief, Quality Assurance Section | | | _ e Section | |
| Item No. | | ITEMS & DESCRIPTION | | QTY. | UNIT | UNIT PRICE | TOTAL PRICE | |
| 1 | Battery Amaron | | | 1 | set | | | |
| • | X-X-X-X-X | | | 1 | 301 | | | |
| | X-X-X-X-X | | | | | | | |
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| elivery Afte Deliver | r having carefu | lly read and accepted your General Condit anty and Price Validity are left blank, it med | Price Validity: ions, I / We quote your ans that I concur wit | ou on the th the Te | item(s) at p | rices note above. aditions specified | - If the space for by DPWH. | |
| | Tel. No. 9 | 57-3446 | | | * | ed Name / Signatur Cellphone No. / E-I | | |