

Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE

Ipil, Zamboanga Sibugay, Region IX

D1 (7)								
Name of Procuring Entity : DPWH-Zamboanga Sibugay 2nd DEO Request for Quotation Revised on :					2024-12-370 December 05, 2024			
revised on				Dat	B :	December 05,	2024	
Standard Form/Title			REQUEST FOR QUOTATION 1F0404 - Electric Supplies and Accessories for use in the New Conference Building, this district Office/End-User			Assistant District Engineer's Office		
CO	MPANY NAME	MI STATE OF THE ST						
	ADDRESS :							
TEL. NO./FAX No. :					TIN:			
representativ	ve not later than 1	price on the item(s) listed below, subject to the 0:00 A.M. of December 11, 2024 in the re Tirso Babiera, Ipil, Zamboanga Sibugay.	Terms and Conditions sturn envelope attached	stated bek	ow and submit to the Goods &	it your quotation dul & Services Division, F	y signed by your Procurement Unit,	
TERMS and CONDITIONS: 1. All entries must be typewritten or legibly written. 2. Delivery period within 6 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. Price validity shall be for a period of sixty (60) calendar days. 4. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon submission of the quotation. 5. Bidders shall submit original brochures of the product. 6. Please indicate the brand for each items being offered. 7. The approved budget ceiling for this procurement is _P_1,530.00				RYANVERGEL C. BUAC Engineer - III Chief, Planning & Design Section BAC Chargersan				
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Brand Name	and Model	*	Warranty	-				
and the same of th		g down	-	-	Mana		-	
Delivery Pe After hi Delivery Pi	aving carefully	6 days read and accepted your General Condition and Price Validity are left blank, it means	Price Validity ns, I / We quote yo that I concur with t	u on the	None item(s) at pr and Conditi	ices note above. ons specified by l	If the space for DPWH.	
	Tel. No. 9	57-3446		-	Print	ed Name / Signatu	re / Date	