		Republic of DEPARTMENT OF PUBL ZAMBOANGA SIBUGAY 2nd Lower Ipil Heights, Ipil,	DISTRICT ENGI	NEERIN		E		
Name of P <u>rocuring Entity</u> : DPWH-Zamboanga Sibugay 2nd DEO Request for Quotation			Request for Quotation	n (P.R. No.)	<u> </u>	2025-03-09		
Revised on :			Date : March 13, 2025					
REQUEST FOR QUOTATION Office Standard Form/Title 25GJF0090 - Liquefied Petroleum Gas (LPG) (11kg.) for use in the District Engineer's Office, this district			ce/End-User Supply Unit					
CO	MPANY NAME :							
ADDRESS :								
TEL. NO./FAX No.					TIN:			
representativ	e not later than 10	rice on the item(s) listed below, subject to the):00 A.M. of <u>March 25, 2025</u> in the retu Tirso Babiera, Ipil, Zamboanga Sibugay.	Terms and Conditions irn envelope attached h	stated bei ierewith, to	ow and subminition the Goods &	t your quotation dury Services Division, F	/ signed by your Procurement Unit,	
TERMS and CONDITIONS : 1. All entries must be typewritten or legibly written. 2. Delivery period within <u>7 days</u> 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 <u>P 1,200.00</u>			Christite Provincer C Advisitant District Provincer BAC Christiperson BAC Christiperson					
ltem No.		ITEMS & DESCRIPTION		QTY.	UNIT	UNIT PRICE	TOTAL PRICE	
1	Liquefied Petrole	eum Gas (LPG) 11kg.		1	tank			
	X-X-X-X-X							
!	ļ							
	 							
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							+	
							+	
Brand Name	and Model	:	Warranty	:			_	
	aving carefully r	7 days read and accepted your General Condition		u on the				
Delivery P	eriod, Warranty o	and Price Validity are left blank, it means	that I concur with t	he Terms	and Conditi	ions specified by l	OPWH.	
	Tel. No. 95	57-3446			Prin	ted Name / Signatu	Ire / Date	

Fililieu Naille / Signalure / Dale

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