Republic of the Phillippines
DEPARTMENT OF PUBLIC WORKS & HIGHWAYS
SURIGAO DEL SUR II

REGIONAL OFFICE XIII
Mancarogo, Bislig City

Name of Procuring Entity: **Department of Public Works & Highways**		Request for Quotation (P.R. No.) : 2024-01-025	
Revised on	:	Date	: January 2, 2024
Standard Form/Title	**REQUEST FOR QUOTATION**	Office/End-User :	Quality Assurance Section

COMPANY NAME : _____
ADDRESS : _____
T.I.N. No. _____
Tel. No./Fax No. : _____

Please quote your lowest price on the item(s) listed below, subject to the Terms and Condition stated below and submit your quotation duly signed by your representative not later than 2:00 P.M. of 16 FEB 2024 in the return envelope attached herewith, to the BAC Secretariat, DPWH, Bslig City.

DPWH BAC RECEIVED DATE: 13 FEB 2024 BISLIG CITY, SURIGAO DEL SUR

1. All entries must be typewritten or legibly written.
2. Delivery period within ten (10) w.d. 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 from date of acceptance by the end-user.
4. Price validity shall be for a period of one hundred twenty (120) calendar days.
5. G.EPS Registration Certificate shall be attached upon submission of the quotation.
6. Bidders submit original brochure showing certifications of the product, if applicable.
7. Please indicate the brand for each items being offered.

The approved budget ceiling for this procurement is **P 70,000.00**

JULIUS S. URIARTE
Asst. District Engineer
(BAC Chairman)

Purpose : **For use in the Quality Assurance Section for the 1st quarter CY-2024.**

Item No.	ITEMS & DESCRIPTION	QTY.	Unit	UNIT PRICE	TOTAL PRICE
1	UPS	7	unit		
	X-X-X-X-X-X-X-X-X-X-X				

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.

_____
Printed Name/Signature/Date

_____
Tel. No./Cellphone No./E-Mail Address