

Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS



REGIONAL OFFICE X
Engineers' Hill, Bulua, Cagayan de Oro City

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	Procuring Entity:				R. No.): X1-24-05-225
Revised on: Standard Form/Title: REQUEST FOR QUOTATION			Date: May 31, 2024 Office/End-User: BUKIDNON SUB-DEO		
Standard	Form/ little: REQUEST FOR QUOTATION	<u> </u>	Office/En	d-User: BUKIDNO	ON SUB-DEO
ADDRES	NY NAME: 6S: ./FAX NO.:			TIN:	
	e quote your lowest price on the item(s) listed below,	subject to th	ne Terms ar	nd Conditions stat	ad holow and cubmit
your quo herewith Oro City.	tation duly signed by your representative not later the , to the BAC Secretariat, 2nd Floor Administration Bui	an 10:00 am	of[]] 1 (<u>) 2በ2ሬ</u> , the r	eturn envelope attached
2. Delivery Purchase Purchase RR-RAS 3. Warrant Equipment 4. Price val 5. Attach C Statemen 6. The App 7. RFQ mu 8. Bidders 9. Please ir	es must be typewritten or legibly written. period within thirty (30) c.d. upon receipt of the approved funde c Order (P.O.) Administrative penalties pursuant to Sec. 69 of the R 2184 shall be imposed for non-delivery without valid reason. y shall be for a minimum of three (3) months for supplies & materi from date of acceptance by the end-user. idity shall be for a period of sixty (60) calendar days. certified True Copy of PhilGeps Registration Number, Mayor's Permit t (if ABC is above 50K), Income/Business Tax Return if ABC roved budget ceiling for this procurement is Php 54,489.99 st be signed by an authorized signatory. shall submit original brochures of the product (if applicable) idicate the brand for each items being offered. s shall submit sealed quotation.	Revised ials; one (1) yea and Omnibus		Chief, Constr BAC CI	NAYVE, AEr uction Division hairman for all of the items. Any or alteration made by the e items shall render the hence, a ground for
Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
	Steel Tape, Rubber 7.5	5	pcs		P
	Traffic Vest	10	pcs		
CM-T-007	Traffic Cone with Blinker	10	pcs		
	Measuring Wedge and Straight Edge	2	set		
	Measuring Wheel (Manual)	3	pcs		
	-&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&		pes	-	<u> </u>
	TOTAL AMOUNT	 .			P
	Please write total amount in words				

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				-	
	Please specify brand name, if applicable.				
URPOSI	For use in the DPWH Bukidnon SUB-DEO Valencia	City, 2nd qu	arter.		
Brand and	Model:		Warranty:		
			Warranty: Price Validity:		
prices	er having carefully read and accepted your Geno note above. If the space for Delivery Period, V concur with the Terms and Conditions specified	Varranty ai	nd Price Va	le quote you in alidity are left b	the item(s) at llank, it means
BAC-Secretariat: Tel. No. 853-2012 Fax No. 853-2060			Printed Name/Signature/Date		
			Tel. No	./Cellphone No./E	E-mail Address