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| | | of the Philipp LIC WORKS | S AND HIGH | NAYS | NRAP | |
| | REGIO | NAL OFFIC | ΕX | | | |
| Name of I | Engineers' Hill, Bu Procuring Entity: DPWH REGIONAL OFFICE X | ilua, Cagayar | Request fo | | ng pilipinas , No.): X4-25-06-261 | |
| Revised on: | | | | | | |
| Standard Form/Title: REQUEST FOR QUOTATION | | | | Office/End-User: CONSTRUCTION DIVISION | | |
| COMPAN | | | | | | |
| ADDRES | NY NAME: IS: | | | TTNI. | | |
| | | | | TIN: | | |
| Please | quote your lowest price on the item(s) listed below, | subject to th | ne Terms and | d Conditions state | ed below and submit | |
| your quo | tation duly signed by your representative not later that, to the BAC Secretariat, 2nd Floor Administration Buil | n 10:00 am ding DPWH | l Of <u>JUN</u> d Regional Of | <u>) V LULU</u> , the reference of the second se | eturn envelope attached ' Hill Bulua, Cagavan de | |
| Oro Citv. | | ang, Drwn | r Neglorial VI | | | |
| TERMS | and CONDITIONS: | | | VIPCIE G | NAYVE, AEr | |
| | es must be typewritten or legibly written. period within thirty (30) c.d. upon receipt of the approved funde | d | | | uction Division | |
| Purchase | order (P.O.) Administrative penalties pursuant to Sec. 69 of the R 9184 shall be imposed for non-delivery without valid reason. | evised | | | -Chairman | |
| 3. Warranty | y shall be for a minimum of three (3) months for supplies & materia | als; one (1) ye | ar for | | | |
| 4. Price val | from date of acceptance by the end-user. idity shall be for a period of sixty (60) calendar days. | | - | | | |
| 5. Attach Certified True Copy of PhilGeps Registration Number, Mayor's Permit and Omnibus Sworn Statement (if ABC is above 50K). Income/Business Tax Return if ABCs above P500K, erasure, correction or alteration made by the | | | | | | |
| 6. The Approved budget ceiling for this procurement is Php 55,000.00 7. RFQ must be signed by an authorized signatory. Supplies the bid non-complying, hence, a ground for | | | | | | |
| 8. Bidders shall submit original brochures of the product (if applicable) disqualification. | | | | | | |
| | ndicate the brand for each items being offered. s shall submit sealed quotation. | | <u>ا</u> ا | | | |
| | | | | | | |
| Item | ITEMS & DESCRIPTION | QTY. | UNIT | UNIT PRICE | TOTAL PRICE | |
| No. | | - | | UNIT PRICE | | |
| | | 100 | Pax | | P | |
| | Meals (4 viand, rice and drink) with snacks -&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&&& | | - | | | |
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| | Please write total amount in words | | <u> </u> | | | |
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| PURPOS | E: Catering services for the proctors, BQS supervisors | , and other | staff who w | ill conduct examin | nations for the | |
| | tion of Contractors' amd Consultants' Projects Enginee | ers pursuant | | | | |
| Brand and Model: Delivery Period: | | | Price Valid | Warranty: Price Validity: | | |
| , i | | . - | | · | | |
| Aft | er having carefully read and accepted your Gen s note above. If the space for Delivery Period, N | eral Condi Narranhi | itions, I / V and Price V | Ve quote you in alidity are left l | n the item(s) at blank it means | |
| prices that T | s note above. If the space for Delivery Period, i | d by DDM | | anuity are left | Manky R Means | |
| | | | н. | | | |
| | concur with the Terms and Conditions specifie | a by DPW | <u></u> | | | |
| | BAC-Secretariat: Tel. No. 853-2012 | | <u></u> | inted Name/Signa | ature/Date | |
| | BAC-Secretariat: | a by DPW | Pr | inted Name/Signa | | |