## Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS BUKIDNON 2<sup>ND</sup> DISTRICT ENGINEERING OFFICE Don Carlos, Bukidnon, Region X

| D   | Name of Procuring Entity : DPWH-BUKIDNON 2ND DEO |   |  |  | equest for Quotation: 2024-10-0394 |                                   |             |  |  |
|---|--|---|--|--|------------------------------------|-----------------------------------|-------------|--|--|
| Revised on : Standard Form/Title : REQUEST FOR QUOTATION  |  |   | : October 29, 2024 Office/End-User : Maintenance Section |  |                                    |                                   |             |  |  |
|   |  | REQUEST FOR QUOTATION   | Office   | e/End-U  | ser: Mainte                        | nance Section                     |             |  |  |
| CON   | MPANY NAME :                                     |   |  |  |                                    |                                   |             |  |  |
| TCI   | ADDRESS :  |   |  |  | ITIN                               | 1.                                |             |  |  |
| TEL. NO./FAX No. : TIN:  Please quote your lowest price on the item(s) listed below, subject to the Terms and Conditions stated below and submit                        |  |   |  |  |                                    |                                   |             |  |  |
|   |  | e on the item(s) listed below, subject to the Terms a<br>er than 10:00 A.M. of November 6, 2024  in the retur |  |  |                                    |                                   |             |  |  |
|   | Pinamaloy, Don Ca                                |   |  | •  | ·                                  |                                   |             |  |  |
|   |  | TERMS AND CONDITIONS  |  |  |                                    |                                   | $\sim$      |  |  |
| All entries must be typewritten or legibly written.     Delivery period within 14 working days upon receipt of the approved funded                                      |  |   |  | MARIS C. CALLAO  |                                    |                                   |             |  |  |
|   |  | penalties pursuant to Sec. 69 of the Revised  |  | Chief, Administrative Section                          |                                    |                                   |             |  |  |
| 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;                   |  |   |  |  | Vice Chairperson, BAC              |                                   |             |  |  |
| one year for equipment, 3 years for IT equipment from date of acceptance by the end-user.   |  |   |  |  |                                    | f                                 |             |  |  |
| Price Validity shall be for a period of sixty (60) calendar days.     Documents required to be submitted with the bid:  |  |   |  | The awarding for this RFQ                              |                                    |                                   |             |  |  |
| 5.1 Certified copy of PhilGEPS Registration;  |  |   |  | will be on lump -sum basis. Prospective Suppliers must |                                    |                                   |             |  |  |
| 5.2 Certified copy of Mayor's Permit/Business Permit 5.3 Geotagged Photo of Physical Store/Establishment.   |  |   |  | quote for all the items.                               |                                    |                                   |             |  |  |
| 5.4 Notarized Omnibus Sworn Statement   |  |   |  |  |                                    | Otherwise the                     | will be     |  |  |
| Bidders shall submit original brochures showing certification of the product.     Please indicate the brand for each items being offered.                               |  |   |  |  |                                    | subjected for<br>disqualification |             |  |  |
| The approved budget ceiling for this procurement is Php 84,000.00     For Corporation please provide Secretary Certificate and Board Resolution.                        |  |   |  |  |                                    | uisquaiiiicatioi                  | '           |  |  |
| 10. FOB: DPWH Compound  |  |   |  |  |                                    |                                   |             |  |  |
| Item  | IT   | EMS & DESCRIPTION   | QTY.   | UNIT   | UNIT ABC                           | UNIT PRICE                        | TOTAL PRICE |  |  |
| No.   |  | EWIS & DESCRIPTION  |  |  |                                    | OMITTAGE                          | TOTALTRIOL  |  |  |
|   | Utility Vehicle                                  |   | 14   | days   | 6,000.00                           |                                   |             |  |  |
|   | Specification:                                   | his mater   |  |  |                                    |                                   |             |  |  |
|   | Capacity: 4.5 cul                                |   |  |  |                                    |                                   |             |  |  |
|   | Driving Type: 4x<br>Fuel Type: Diese             |   |  |  |                                    |                                   |             |  |  |
|   |  | x-x-x-x nothing follows x-x-x-x   |  |  |                                    |                                   |             |  |  |
|   |  | X X X Nothing follows X X X X   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
| Purpose:  | To be used in the                                | e supervision and operation along Jct.  |  |  |                                    |                                   |             |  |  |
|   | Dologon-Busco-(                                  | Quezon Road for the period of November 26 -   |  |  |                                    |                                   |             |  |  |
|   | December 13, 20                                  | 024   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  |                                    |                                   |             |  |  |
| Brand and   |  | 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. If the space |  |   |  |  |                                    |                                   |             |  |  |
| for Delivery Period, Warranty and Price Validity are left blank, it means that I concur with the Terms and Conditions specified by                                      |  |   |  |  |                                    |                                   |             |  |  |
| DPWH.   | •  | •   |  |  |                                    |                                   | •           |  |  |
|   | Printed Name / Signature / Date                  |   |  |  |                                    |                                   |             |  |  |
|   |  |   |  |  | Filineu Name / Signature / Date    |                                   |             |  |  |
| Tel. No. / Cellphone No. / E-mail Address   |  |   |  |  |                                    |                                   |             |  |  |