		Republic of the Philippines					
		Department of Public Works and High	ways				
		Sorsogon 1st District Engineering Office					
		Guinlajon, Sorsogon City					
Name of Procuring Entity : DPWH-Sorsogon 1st DEO				Request for Quotation (P.R. No.) : 2024-10-0107			
Revised on :			Date: 10/3/24				
Standard Form/Title : REQUEST FOR QUOTATION			Office/End-User: DPWH Sorsogon 1st DEO				
СОМ	PANY NAME :						
	ADDRESS :						
TEL.	NO./FAX NO. :	price on the item (s) listed below, subject to the Terms and Conditions stated below	ow and submi	t vour auotati	on duly signed by y	our representative of	
later than 1	0:00 A.Maof 1	C D u the return envelope attached herewith, to the Procurement Unit,	DPWH Sorso	gon 1st DEO,	Guinlajon, Sorsogo	on City.	
	1.1.0						
TERMS a	nd CONDITIONS.		- 2				
	must be typewritten or						
2. Delivery perioid within <u>Thirty (30) calendar days</u> upon receipt of the approved funded Purchased Order (P.O.)				NIDA D. RELLAMA			
Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for							
non-delivery without valid reason.				OIC-Assistant District Engineer			
3. Warranty shall be for a minimum of three (3) months for supplies & materials; one year for Equipment;				BAC-Chairman			
 3 years for IT Equipment from date of acceptance by the end-user. 4. Price validity shall be for a period of sixty (60) calendar days. 							
1	S						
 For all Supplier, the two (2) envelope system will be followed. The first envelope shall contain The following eligibility document/s. 							
PhilGEPS Registration Certificate (Platinum), Mayor's Permit, DTI/SEC Registration, Tax Clearance including Income/				- The second			
Business Tax Return, Certificate of registration, original brochures showing certifications of the product (if applicable),							
omnibus sw	orn statement (n/a for	ABC < 50,000.00)					
shall be attac	ched upon submission of	the quoatation.					
6. Bidders shall submit original brochures showing certifications of the product if applicable							
7. Please indicate the brand for each items being offered. (if applicable)							
8. The approved budget ceiling for this procurement is 100,700.00							
		wise, bids will not be accepted.					
	on thru electronic mai	/fax will not be accepted.					
ITEM NO.		ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE	
			1				
1		ir-condition Inverter Split Type 2.5 HP	1	unit			
	Note: Auth	entic and Genuine product, must be premium and high			1.1.1		
	Quality : In	ncluding Installation of unit. Three (3) years warranty on PC					
		er normal condition and 5 years warranty on compressor	1	· · · · · · · ·			
2		heavy duty metal base (A3)	1	unit			
3		er, automatic, 16-sheet capacity	1	unit			
4		Machine (can laminate up to A3 size)	1	unit			
5		luminous, 12"	2	pcs			
6	Stand Fan, 10	5"	2	unit			
			-				
		ise at DPWH - Sorsogon 1st DEO, Guinlajon Sorsogon City. (4th		the second	1 mil and a	and the second sec	
	Quarter, 2024)						
			TOTAL				
			Amount in Words:				
and the second	nd Model :	Warranty :	<u>.</u>			-	
Delivery	Period :	Price Validity : read and accepted your General Conditions, I/We quote you o the item(s) at priv	ces not above	. If the space	for Delivery Period	d, Warranty and Price	
Aj Validity a	tter having carefully re left blank, it means	that I concur with the Terms and Conditions specified by DPWH.		. y 1			
				Printec	l Name Signature	Date	
				n.1.31 . C	Habour Mar / P	ail Addumm	
			i.	tel. No. : Ce	llphone No. / E-ma	an Address	

1

CHECKLIST FOR GOOD'S

(Mode of Procurement: SMALL VALUE PROCUREMENT)

<u>Attachment :</u>

- 1. DTI Business Name/SEC Registration of Supplier
- 2. TAX Clearance & Monthly Payment of Taxes including Income/Business Tax Return
- 3. Certificate of PHILGEPS Registration0
- 4. Latest/Updated Mayor's/Business Permit
- 5. Certificate of Registration (COR)
- 6. Omnibus Sworn Statement (Revised per GPPB Resolution No. 16-2020
- 7. Bidders shall submit original brochures showing certifications of the product (if applicable)
- 8. Special Power of Attorney of Liaison and Valid Identification Card (if applicable)

Note: Please indicate the brand for each items being offered (if applicable)

Supplier's Signature