Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS NEGROS ORIENTAL 3RD DISTRICT ENGINEERING OFFICE

Siaton, Negros Oriental



1							
Name of Procuring Entity:	DPWH, Negros Oriental 3rd DEO	Request for Quotation(P.R. No.):	2025-05-0047				
		Date: 05/27/2025					
Standard Form/Title:	REQUEST FOR QUOTATION	Office End User: Supply Unit, Cashiering Unit,					
Mode of Procurement:	Small Value Procurement	Finance, and Administrative Section					
COMPANY NAME:		PHILGEPs _?					
ADDRESS:		TCC NO.					
TEL. NO./FAX NO.:		TTN					

Please submit your quotation for the item(s) listed below, which may be submitted in person at the Procurement Unit, DPWH-Negros Oriental 3RD DEO, KM44 Malabuhan, Siaton, Negros Oriental, or thru registered maile, facsimile or E-mail, not later than 10:30 A.M. of June 2, 2025.

Quotation may be submitted open or sealed and should be duly signed by the firm's owner or authorized representative subject to the terms and conditions, hereof.

TERMS AND CONDITIONS:

- All entries must be typewritten or legibly written, 1.
- 2. Delivery period within 30 Calendar Days upon received 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 reasons,
- 3. Warranty shall be for a mininum of three (3) months for supplies & materials; one (1) year for Equipment; from date of acceptance by the end-user.
- 4. Prices validity shall be for a period of Sixty days (60) calendar days.
- PhilGEPS Registration Certificate, may attached BIR Certificate of Registration In lieu of DTI/SEC Registration and Mayor's 5. Permit, Income/Business Tax Return and Omnibus Sworn Statement shall be included upon submission of the quotation.
- Bidders shall submit original brochures showing certifications of the product. If applicable. 6.
- 7. Bidders must quote for all of the items. Any erasure, correction or alteration made by the bidders in any of the items shall render the bid non-complying, hence, a ground for disqualification.
- 8. The DPWH reserves the right to accept or reject any bid, to annul the bidding process, and to reject all bids at any time prior to contract award without thereby incurring any liablity to the affected bidder.
- 9. The approved budget ceiling for this procurement is Php 766,000.00.

JANETTE M. SADIE

BAC Chairman

Lot No. 1	ITEM & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
Item 1	Dual Sided Card Printer with Complete ID Supplies Package ID Software	1	unit	P	P
Item 2	Full Body proofing Safety harness kit with shock absorbing lanyard (adjustable)	5	pcs	P	P
Item 3	Swivel Executive Office Chair (High Back Mesh Chair Seat Office Desk Chairs Height Adjustable Armchair Black New)	40	pcs	P	p
Item 4	Computer Chair w/ Arm	1	pcs	P	Р
Item 5	Electric Typewriter	2	units	P	P
Item 6	Executive Table	1	pcs	P	P
Item 7	Inverter TIG/ARC Weld - Welding Machine 300Amps	1	unit	P	P
Item 8	Garden Pressure Washer (Chargeable) w/ complete Accessories	1	unit	P	P
Item 9	Exhaust Fan 14"	1	рс	P	P
Item 10	Water Jet Pump 1 HP	1	unit	P	P
Item 11	Water Pressure Tank (40 gal)	1	unit	P	P
Item 12	Pail with stainless steel handle (24 liters)	5	units	P	P
Item 13	Rotary Hammer Drill 800W 26mm w/ complete Accessories	1	unit	P	P
Item 14	Cordless Impact Drill/Driver w/ complete Accessories	1	unit	P	P
Item 15	Wall Fan	3	pcs	P	P
Item 16	Folding Ladder (6 Ft.)	1	рс	P	P
Item 17	Digital Camera	1	unit	P	P

Item 18	Automatic Shredder Paper 20L (see attached picture)	1	unit	P	P			
	x-x-x-x-x-x							
	Purpose: For use in Supply, Cashiering Unit, Finance and Administr	ply, Cashiering Unit, Finance and Administrative Section.						
		GRANI	ND TOTAL AMOUNT (Php)					
	Please specify total amount in words (Php)							
Please	specify brand names & model, if applicable.							
Brand a	and Model :		Warranty	r:				
Delivery Period :			Price Validty:					
	After having carefully read and accepted your General C	ondition	s, I / We	quote you	on the item	(s) at prices		
note ab	ove. If the space for Delivery Period, Warranty and Price Va	idity ar	e left blar	k, it means	s that I cond	cur with the		
Terms a	and Conditions specified by DPWH.							
davad.renee@dpwh.gov.ph			Printed Name/Signature/Date					
			Tel No./Cellphone No./E-mail Addres			Address:		
NIR 17.5	5 MGN/RSD							