

Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE

Ipil, Zamboanga Sibugay



Tel. No. / Cellphone No. / E-mail Address

: DPWH-Zamboanga Sibugay 2nd DEO Name of Procuring Entity 2024-05-141 Request for Quotation (P.R. No.) Revised on May 30, 2024 Date REQUEST FOR QUOTATION Standard Form/Title Office/End-User Maintenance Section 24GJF0173 - Safety Vest's for use in the Maintenace Section, this district **COMPANY NAME ADDRESS** 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 your quotation duly signed by your representative not later than 10:00 A.M. of ____June 06, 2024 in the return envelope attached herewith, to the Goods & Services Division, Procurement Unit, Zamboanga Sibugay 2nd DEO, Tirso Babiera, Ipil, Zamboanga Sib TERMS and CONDITIONS: 1. All entries must be typewritten or legibly written. 2. Delivery period within 7 days upon receipt of the approved funded Purchase Order (P.O). Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for nondelivery without valid reason. 3. Warranty shall be for a mininum of three (3) months for supplies & materials; one year for Equipment; 3 years IT Equipment from date of acceptance by the end-user. Chief, Planning & De gn Section 4. Price validity shall be for a period of sixty (60) calendar days. 5. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon submission of the quotation. BAC Chairperson 6. The approved budget ceiling for this procurement is P 2,,380.00 Item **ITEMS & DESCRIPTION** QTY. UNIT **UNIT PRICE** TOTAL PRICE No. 10 pcs Safety Vest 2 Safety Vest 5 pcs 3 4 pcs Safety Vest X-X-X-X Brand Name and Model : None Warranty None 7 days Price Validity : None **Delivery Period** 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 Tel. No. 957-3446