

Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE

Ipil, Zamboanga Sibugay



Name o	f Procuring Ent	ity	: DPWH-Zamboanga Sibugay 2nd DEG	Sibugay 2nd DEO Request for Quotation (P.R. No.) :			2024-04-145		
Revised on :							April 19, 20	April 19, 2024	
REQUEST FOR QUOTATION Standard Form/Title 24GJF0174 - Webcam 1080p for use in the Commission on Audit, this district					e/End-User Finance Section				
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 April 29, 2024 in the return envelope attached herewith, to the Goods & Services Division, Procurement Unit, Zamboanga Sibugay 2nd DEO, Tirso Babiera, Ipil, Zamboanga Sib									
1. All entries must be typewritten or legibly written. 2. Delivery period within 10 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 non-delivery 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. 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. 6. The approved budget ceiling for this procurement is P 1,550.00								SUAC Rection	
Item No.			ITEMS & DESCRIPTION		QTY.	UNIT	UNIT PRICE	TOTAL PRICE	
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Brand Name and Model : HIKVISION Warranty									
Delivery Period: 10 days Price Validity: None 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.									
Tel. No. 957-3446 Printed Name / Signature / Date									
* Tel. No. / Cellphone No. / E-mail Address									