Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS <b>ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE</b> Lower Ipil Heights, Ipil, Zamboanga Sibugay, Region IX								
Name of P <u>rocuring E</u> ntity : DPWH-Zamboanga Sibugay 2nd DEO Request for Quotation				Request for Quotation				
Revised on :					Date : January 23, 2025			
Standard Form/Title 25GJF0084 - Liquefied Petroleum Gas (11kg.) for use in the Supply Unit, this district Office					ce/End-User Supply Unit			
CO	MPANY NAME	: I:T						
	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 representative not later than 10:00 A.M. of <u>January 30, 2025</u> in the return envelope attached herewith, to the Goods & Services Division, Pro-							v signed by your Procurement Unit,	
TERMS and CONDITIONS :   1. All entries must be typewritten or legibly written.   2. Delivery period within <u>7 days</u> 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. Price validity shall be for a period of sixty (60) calendar days.   4. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon submission of the quotation.   5. Bidders shall submit original brochures of the product .   6. Please indicate the brand for each items being offered.   7. The approved budget ceiling for this procurement is <u>P 1,230.00</u>					RYAN VERGEL C. BUAC Chief, Planning & Design Section BAC Chairperson			
ltem No.	·		<b>ITEMS &amp; DESCRIPTION</b>		QTY.	UNIT	UNIT PRICE	TOTAL PRICE
1	Liquefied Petr	oleur	n Gas 11kg.		1	tank		
	X-X-X-X-X							
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Brand Name and Model . Warranty .   Delivery Period : 7 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 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 / Signat							ed Name / Signatu	re / Date

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