



Republic of the Philippines

DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

ZAMBOANGA SIBUGAY 2nd DISTRICT ENGINEERING OFFICE

Lower Ipil Heights, Ipil, Zamboanga Sibugay, Region IX

Name of Procuring Entity

: DPWH-Zamboanga Sibugay 2nd DEO

Request for Quotation (P.R. No.) :

2025-04-160

Revised on :

Date : _____

April 30, 2025

REQUEST FOR QUOTATION

Standard Form/Title

25GJF0155 - Service Vehicle Insurance for use in the
Renewal of LTO Registration of service vehicle Mit.
Strada with Plate No. KAB-9395, this district

Office/End-User

Maintenance Section

COMPANY NAME

ADDRESS

TEL. NO. FAX NO.

THE

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 May 08, 2025 in the return envelope attached herewith, to the Goods & Services Division, Procurement Unit, Zamboanga Sibugay 2nd DEO, Tirso Babiera, Ipal, Zamboanga Sibugay.

TERMS and CONDITIONS -

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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).
3. Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for non-delivery without valid reason.
4. Price validity shall be for a period of sixty (60) calendar days.
5. G-EPIS Registration Certificate/Mayor's Permit/DTI shall be attached upon submission of the quotation.
6. Bidders shall submit original brochures of the product .
7. Please indicate the brand for each item being offered.
8. The approved budget ceiling for this procurement is **P 2,400.00**

CHRISTOPHER L. EBAL
Assistant District Engineer
BAC Chairperson

Name and Model

Delivery Period	7 days
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Warranty

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 every 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