

Republic of the Philippines
Department of Public Works and Highways
AGUSAN DEL NORTE
DISTRICT ENGINEERING OFFICE
REGIONAL OFFICE XIII
J. Rosales Avenue, Butuan City

Name of Procuring Entity: DPWH-DEO, Agusan del Norte	Request for Quotation (P.R. No.): 2024-04-0036
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Revised on

Date : 4/4/2024

Standard Form/T	REQUEST FOR QUOTATION
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Office/End-User : Maintenance Section

Company Name:

Address:	
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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 _____ in the return envelope attached herewith, to the Procurement Unit, DPWH-DEO, Agusan del Norte.

TERMS and CONDITIONS:

1. All entries must be typewritten or legibly written.
2. Delivery period within 30 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 minimum 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. Bidders shall submit original brochures of the product.
7. Please indicate the brand for each items being offered.
8. The approved budget ceiling for this procurement is **P 351,311.25**


LIZ M. ABRAM
OIC-Assistant District Engineer
BAC Chairperson

[illegible]

Brand and Model :

Warranty :

Delivery Period :

Price Validity :

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.: (085) 817-3696/817-1436

Email Address: dpwhagusandelnorte@yahoo.com.ph

Printed Name/Signature/Date

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