



COMPANY NAME :		
ADDRESS :		
TEL. NO./FAX NO. :		TIN:

TERMS AND CONDITIONS:

1. All entries must be typewritten or legibly written.
2. Delivery period within **15 c.d.** 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. **PhilGEPS Registration Certificate/Mayor's Permit/Omnibus Sworn Statement /Latest Tax Clearance/DTI or SEC** shall be attached upon submission of the quotation.
6. Bidders must quote for all of the items. Any erasure, correction or alteration made by the bidders in any of the items shall render the bid non-complying, hence, a ground for disqualification
7. The DPWH reserves the right to accept or reject any bid, to annul the bidding process, and to rejects all bids at any time prior to contract award without thereby incurring any liability to the affected bidder.
8. Bidders shall submit original brochures showing certifications of the Product. *(if applicable)*
7. Please indicate the brand for each items being offered.*(if applicable)*
9. The approved budget ceiling for this procurement is **Php: 284,000.00**

Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
1	Airconditioning Unit 2.5 Hp	2.00	unit		
2	Airconditioning Unit 1.5 Hp	1.00	unit		
3	Airconditioning Unit 1.0 Hp	1.00	unit		
	(Please write Total Amount in Words) TOTAL AMOUNT				
	Purchase/delivery of Airconditioning Unit for use at the District Engineer's Office, Radio Room and Records Unit and Stockroom, DPWH Compound, Borongan City			TOTAL	

After having carefully read and accepted your General Conditions, I / We quote 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./Cellphone #/E-mail Address