

Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

QUIRINO DISTRICT ENGINEERING OFFICE

Cabarroguis, Quirino, Region II



Procuring Entity	:	DPWH - QDEO	P.R. No.		:	2024-05-74, 2024-05-76, 2024- 06-89		
Revised on Standard Form/Title	:	REQUEST FOR QUOTATION	Date Office/End U	Jser	:	05/24/2024,06/03/2024 Administrative Section, Construction Section, Procurement Unit		
COMPANY NAME *	:							
ADDRESS *	:							
TEL. NO. /FAX. No. *	:			TIN *:				
PhilGEPS Reg. No. *	:			Email *:		34		
Please quote your lowest price on the item(s) listed, 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 <u>June 11, 2024</u> in the return envelope attached herewith, to the Bids								
and Award Committee, Quirino District Engineering Office, Cabarroguis, Quirino.								

TERMS and CONDITIONS:

1. All entries must be type written or legibly written.

2. Delivery period within 30 CD upon receipt of the approved funded Purchased Order (P.O.). Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for nondelivery without valid reason.

3. Warranty shall be for a minimum of three (3) months for supplies and materials; One (1) year for Equipment; Three (3) years IT Equipment from date of acceptance by the end user.

Price Validity shall be for a period of 60 calendar days

5. A. PhilGEPS Registration Number

B. Mayor's Permit shall be attached upon submission of the quotation.

6. Please indicate the brand for each items being offered.

7. The approved budget ceiling for this procurement is P 702,190.00

LL G. LOZANO Chief, Planning and Design Section BAC Chairman /

ITEM No.	ITEM & DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL PRICE
	FOR USE OF ADMINISTRATIVE SECTION				
1	Toner MP 2501, Gestetner	3 -	cart		
2	Print Cartridge, Black IMC2000/IMC2500	3 -	cart.		
3	Print Cartridge, Yellow IMC2000/IMC2500	3 /	cart.		
4	Print Cartridge Magenta IMC2000/IMC2500	3 -	cart.		
5	Print Cartridge Cyan IMC2000/IMC2500 /	3 -	cart.		
6	Copyprinter Ink Black DX2430	3 -	pc-		
	FOR USE OF CONSTRUCTION SECTION				
7	Toner, Black, MPC25035 (842597) for Gestetner IM C2500	8 -	cart.		
8	Toner, Yellow, MPC25035 (841961) for Gestetner IM C2500	8	cart		
9	Toner, Magenta, MPC25035 (841962) for Gestetner IM C2500	8	cart.		
10	Toner, Cyan, MPC25035 (841963) for Gestetner IM C2500	8	cart.		
	FOR USE OF PROCUREMENT UNIT				
11	Toner, Black, MPC2503 (841957)	5	cart.		
12	Toner, Yellow, MPC2503 (841961)	5 /	cart		
13	Toner, Magenta, MPC2503 (841962)	5 -	cart.		
14	Tower, Cyan, MPC2503 (841963)	5 _	cart.		

2024-06-89-C - Supply and delivery of toner for use of Administrative Section, Construction Section, and Procurement Unit, this district

Place of Delivery:

The awarding for this RFQ will be on a lump-sum basis. Prospective Suppliers must quote for all items. Otherwise they will be subjected for disqualifications

TOTAL PHP Posting: June 8, 2024

TOTAL AMOUNT IN WORDS:



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QUIRINO DISTRICT ENGINEERING OFFICE





Procuring Entity	1	DPWH - QDEO	P.R. No.		:	2024-05-74, 2024-05-76, 2024- 06-89
Revised on			Date			05/24/2024,06/03/2024
Standard Form/Title	÷	REQUEST FOR QUOTATION	Office/End User		:	Administrative Section.
						Construction Section.
						Procurement Unit
COMPANY NAME *						
ADDRESS *	:					
TEL. NO. /FAX. No. *	:			TIN *:		
PhilGEPS Reg. No. *	:			Email *:		
Please quote your lowes	st pr	ice on the item(s) listed, subject to th	e Terms and C	onditions s	tated	d below and submit your quotation
duly signed by your repr	ese	ntative not later than 10:00 A.M. of <u>J</u>	une 11, 2024 in	the return	env	elope attached herewith, to the Bid
and Award Committee,	Quir	ino District Engineering Office, Caba	rroguis, Quirino			•
B 1 1M 11						
Brand and Model : Delivery Period :			Warranty Price Validity		:	
	IIv re	ead and accepted your General Condition			at nri	ces note above. If the space for Delivery
		ity are left blank, it means that I concur w				
		.,	an and ronnie and	Conditions	opoo	med by Br VVII.
			Pri	nted Name	2 / Si	gnature / Date
				nica nami	07 01	ghatare / Date
			Tel	. No./CP N	lo. &	email address
Note: Fill out all Fields		h Astonial *				