



Republic of the Philippines
Department of Public Works and Highways
ZAMBOANGA DEL NORTE
1ST ENGINEERING DISTRICT
Segabe, Pinan Zamboanga del Norte, Region IX

Name of Procuring Entity:	Request for Quotation	P.R. No.: 24-06-071
Revised on:	Office/End-User:	Date: 6/4/2024
Standard Form/Title:	Quality Assurance Section	
COMPANY NAME :	TIN :	
ADDRESS :		
TEL NO./FAX NO. :		

Please quote your lowest price on the item(s) listed below, subject to the Terms and Condition stated below and submit your quotation duly signed by your representative not later than 10:00 A.M. of JUL 09 2024 in the return enveloped attached herewith, to the BAC Secretariat, DPWH Compound, Segabe, Piñan, Zamboanga del Norte.

TERMS and CONDITIONS:

1. All entries must be typewritten or legibly written
2. Delivery period within thirty (30) 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. G-EPS Registration Certificate/Mayor's Permit/DTI shall be attached upon submission of the quotation.
6. Bidders shall submit original brochures showing certification of the product.
7. Please indicate the brand for each items being offered.
8. The approved budget ceiling for this procurement is Php 52,464.00

RAMON L. BARRERA, JR.
Engineer III/Chief, QAS
BAC Chairperson

Stock No.	ITEMS & DESCRIPTIONS	QTY	UNIT	UNIT PRICE	TOTAL PRICE
1	Airconditioner, Window Type, 2.5 HP	1	UNIT		
	X-X-X-X-X-X-X-X-X-X				
Purpose: Supply and delivery of 1 unit Airconditioner, Window Type, 2.5 HP for use in the replacement of 1 unit aircoinditioner at the Office of the Quality Assurance Section-1sr DEO, Segabe, Piñan, Zamboanga del Norte.					
Total Amount					

Brand 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.

Telefax: 065-213-6395
dpwh_segabe@yahoo.com

Printed Name/Signature/Date

Tel. No./Cellphone No./Email Address