

Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
DAVAO ORIENTAL
2ND DISTRICT ENGINEERING OFFICE
REGION XI
Matiao, City of Mati

Name of Procuring Entity :	Request for Quotation No. 24-06-283	P.R. NO: 24-06-286
Revised on:	Date: June 20, 2024	
Standard Form/Title :	Office/End-User: Administrative Section	
COMPANY NAME :	For use of Elevator at DPWH Office, Matiao, City of Mati, Davao Oriental.	
ADDRESS :		
TEL. NO. / FAX NO. :		
		TIN NO.

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 _____ in the return envelope attached herewith, to the BAC Secretariat for Goods, DPWH, City of Mati, Davao Oriental.

TERMS and CONDITIONS:

1. All entries must be typewritten or legibly written.
2. Delivery period within **10 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 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 certifications of the product, if
7. Please indicate the brand for each items being offered.
8. The approved budget ceiling for this procurement is **Php56,000.00**


FIDELE M. BISEN
Asst. District Engineer
BAC Chairperson

Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE
1	SENSOR PROXIMITY LWD 24VDC 4MA	1	unit		

Brand and Model : _____

Delivery Periods : _____

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.

Printed Name / Signature / Date

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

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