



Republic of the Philippines  
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS  
**ZAMBOANGA DEL NORTE**  
**1<sup>ST</sup> DISTRICT ENGINEERING OFFICE**  
Segabe, Piñan, Zamboanga del Norte, Region IX



Name of Procuring Entity:

## Request for Quotation

P.R. No.: 24-03-014

Revised on:

Date: 3/18/2024

Standard Form/Title:

Office/End-User: **MAINTENANCE SECTION**

**COMPANY NAME :**

**ADDRESS :**

**TIN :**

TEL NO./FAX NO. :

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 \_\_\_\_\_ in the return enveloped attached herewith, to the BAC Secretariat, DPWH Compound, Segabe, Piñan, Zamboanga del Norte.

**MAR 25 2024**

**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 P \_\_\_\_\_

**RAMON L. BARRERA, JR.**

Engineer III  
BAC, Chairperson

133,800.00

[illegible]

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.

Teletax: 065-213-6395  
dpwh\_segabe@yahoo.com

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Printed Name / Signature / Date

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