



Name of Procuring Entity : DPWH-DCIIDEO, Tugbok Davao City  
Revised on: \_\_\_\_\_  
Standard Form/Title : REQUEST FOR QUOTATION  
(Small Value Procurement)

COMPANY NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
TEL. NO./FAX No. \_\_\_\_\_

**TERMS and CONDITIONS;**

- 1) All entries must be typewritten or legibly written,
- 2) Delivery period within twenty (20) W.D. upon receipt of the approved 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 must be for a minimum of three (3) months for supplies & materials, one (1) year for Equipment; 3 years for I.T. Equipment from date of acceptance by the end-user.
- 4) Price validity shall be for a period of sixty (60) calendar days.
- 5) ***Phil-GEPS Registration Certificate/Mayor's Permit/DTI or SEC/Tax Clearance Authority of Signing Officials and Omnibus Sworn Statement (Specific to Contract) shall be attached upon submission of the quotation and every page of the document must be signed.***
- 6) Bidders shall submit original brochures showing certifications of the product, if applicable,
- 7) Please indicate the brand of each items being offered,(If applicable)
- 8) The Approved Budget for the Contract is ***P 299,376.00 one lot price***

Please quote your lowest price on the item(s) listed below subject to the Terms & Conditions stated and submit your duly signed quotation personally (Submitted thru courier/fax/e-mail will not be accepted) not later than 10:00 AM. of \_\_\_\_\_ to the BAC Secretariat for Goods, DPWH-DCIODEO, Tirol St., Tugbok, Davao City.

REYNALDO A. AMORES  
Chief, Const. Section  
(BAC-Chairperson)

[illegible]

Brand and Model:	_____	Warranty :	_____
Delivery Period :	_____	Price Validity :	_____
Please indicate Payment Term:	_____	Credit	_____
		C.O.D.	_____

*After having carefully read & accepted your General Conditions, I/We quote you on the item(s) at prices noted 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.*

DPWH-DCIIDEO  
Tel. No. 293-1765 (Procurement Unit)  
Fax No. 293-0551

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*Printed Name / Signature / Date*

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