

Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS CENTRAL OFFICE

41	- W W -	Maniia			BAGONG PILIP	INAS	
		Request for Quotation (P.R. No.):		2025-05-221			
Revised on:		Date: June 2, 2025		ABC: Php104,500.00			
Standard Form/Title: REQUEST FOR QUOTATION			Offi	ice/End-User:	604.00	WW. 0000	
-	of Procurement: Shopping (Section 52.1(b))				COA-DF	PWH-OSEC	
COMPANY NAME:				PHILGEPs No.:			
ADDRESS :				TCC No.:			
TEL./FAX NUMBER:				TINI			
Please	e submit your quotation for the item(s) listed be	low, which may be submitt	ed in pers	on at Boon	n 503 Bidding Root	m Procurement	
Tu	ine 11, 2025	Area, Manila, or thru regist	ered mail	, facsimile (or E-mail, not later	than 9:00 A.M. of	
una c	ition may be submitted open or sealed and shou onditions, hereof.	ind be duly signed by the fi	rm's owne	er or author	ized representative	subject to the term	
	IS and CONDITIONS:						
1. All (entries must be typewritten or legibly written.						
Z. Deli	ivery period within 20 working days upon re	eceipt of the approved fun	ded Purch	nase Order	(P.O).		
Administrative penalties pursuant to Sec. 69 of the Revised IRR-RA 9184 shall be imposed for non-							
aen	very without valid reason.						
ع. wa	rranty shall be for a mininum of three (3) mon	iths for Supplies from d	ate of acc	eptance by	the end-user.		
T. FIIC	e validity shall be for a period of sixty (60) cales	ndar davs.					
5. PNII	GEPS Registration Number and Mayor's Permit s	shall be attached upon sub	mission of	f the quotal	tion.		
דוט	/SEC and Latest Tax Clearance shall be submitt	ed before the award of Pur	rchase Ord	der /D ()			
0. 10 (establish financial capability, bidders may attach	n/includenin its quotation a	Commitee	d Line of Cr	edit (CLC)		
7 For	ivalent to 10% of the ABC, from a commercial of	or Universal Bank.					
7. For Small Value Procurement, Income and Business Tax Return shall be attached, (for ABCs above Php 500,000.00)							
o, For Small value Procurement with ABC above Php50,000,00, Omnibus Sworn statement shall be attached and submitted							
5. Didders must quite for all of the items and shall submit a proposal on each item and evaluation and							
award of contract will be undertaken on a lump sum basis.							
10. Any erasure, correction or alteration made by the bidders in any of the items shall render the bid							
11 Th	complying, hence, a ground for disqualification.						
71. III	e DPWH reserves the right to accept or reject a	ny bid to annul the bidding	process,	and to reje	ect		
מווג 12 Th	oids at any time prior to contract award without	thereby incurring any liabi	lity to the	affected bi	idder.		
13 Ric	e brand and model for each item/s being offered	d must be indicated.					
to: ha	ds may be submited: (a) in-person at the Goods	and Services Division, Pro	curement	Service, or	(b) through electro	nic mail addressed	
co. Du	cg_co@dpwh.gov.ph (documents must be so	canned clearly in one (1) Pi	DF file, ind	cluding atta	chments, if any.)		
		,					
		galy					
		MEDMIER G/ MALIG					
	Ass	sistant Secretary for Technica	l Services				
	a	ind Information Management	Service				
		Chairperson, BAC for Goo	ods				
		5.0 No.48, Series of 202	251				
Item No.	ITEMS and DESCRIPT	TON	QTY.	UNIT	UNIT PRICE	TOTAL PRICE	
	Inventory of Printing Supplies for the use	at the Office of the Au	ditor	 -			
1	Post Screw Binder, with finger ring and clear	r plastic pocket for labels.					
1	152mm x 229mm x 381mm (6x9x15"), with pri	int logo (COA)	275	unit			
		TOTAL AMOUNT (Php)					
	Please specify total amount in words (Php)						
Please	specify brand names & model, if applicab	ole.					
Brar	nd Name & Model:		Warrant	v:			
Delivery Period: Price Validity:							
After	having carefully read and accepted your general condition lidity are left blank, it means that I concur with the Terms	ns, I / We quote you on the item	(a) at mulas.	note above.	If the space for Deliver	y Period, Warranty and	
		and conditions specified by DP	WH.				
	Tel. Nos.5304-3530/5304-3188/5304-3208			Si	gnature Over Printer	Name/Date	
mail A	ddress: bacg_co@dpwh.gov.ph						
12.1.3 AF	BC/MPOA	Page 1 of 1		Tel. no./Cellphone No./E-mail Address			