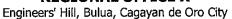


## Republic of the Philippines

## DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

## **REGIONAL OFFICE X**





			D	0 1 1	D.D. N. V. V. D.A. CO. 44E	
	Procuring Entity:		Date:		P.R. No.): X4-24-1 <i>0</i> -445	
Revised on: Standard Form/Title: REQUEST FOR QUOTATION				Date: October 1, 2024 Office/End-User: CONSTRUCTION DIVISION		
Standard	Formy fide. REQUEST FOR QUOTATION		Office/Lifu	-oser. Const	ROCITON DIVISION	
<b>ADDRES</b>				TIN:		
	/FAX NO.:					
attached Cagayan TERMS:  1. All entrie 2. Delivery Purchase IRR-RA 9 3. Warranty Equipment 4. Price vali 5. Attach Cotatement 6. The Appi 7. RFQ mus 8. Bidders 9 9. Please in	quote your lowest price on the item(s) listed below, tation duly signed by your representative not later that herewith, to the BAC Secretariat, 2nd Floor Administrative Oro City.  and CONDITIONS:  Is must be typewritten or legibly written.  period within thirty (30) c.d. upon receipt of the approved funder (P.O.) Administrative penalties pursuant to Sec. 69 of the Rit84 shall be imposed for non-delivery without valid reason.  y shall be for a minimum of three (3) months for supplies & materiative shall be for a period of sixty (60) calendar days.  ertified True Copy of PhiliGeps Registration Number, Mayor's Permit the (if ABC is above 50K), Income/Business Tax Return if ABC roved budget ceiling for this procurement is Php 192,500.00 at be signed by an authorized signatory.  shall submit original brochures of the product (if applicable) delicate the brand for each items being offered.	ed levised als; one (1) year and Omnibus s above P506	er for Sworn OK. An by re	gional Office X  VIRGIE G  Chief, Cons  BAC	K, Engineers' Hill, Bulua,  I. NAYVE, AEr  truction Division  Chairman  Ote for all of the items. ection or alteration made any of the items shall n-complying, hence, a	
Item	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT	TOTAL PRICE	
No.	Automatic Transmission Assembly (4x4) 5 Speed	<b>Q</b>		PRICE		
SP-A-219	with Torque Converter	1	assy		P	
	-888888888888888888888888888888888					
<del></del>	TOTAL AMOUNT				P	
	Please write total amount in words					
					******	
					- ***	
			1			
		-	1			
				<u> </u>	<u> </u>	
				<u> </u>		
					****	
	Please specify brand name, if applicable.		.1			
PURPOS	E: For Repair and Maintenance of Mitsubishi Strada F	Pick-up, H1-8	3264 (MGG-3	17/100807).		
Brand and	1 Model		\Marranty:			
Brand and Model: Delivery Period:			Warranty:Price Validity:			
Afte prices	er having carefully read and accepted your Gen note above. If the space for Delivery Period, \ concur with the Terms and Conditions specifie	Warranty a	tions, I / W nd Price Va ł.	e quote you lidity are lef	in the item(s) at t blank, it means	
	BAC-Secretariat: Tel. No. 853-2012 Fax No. 853-2060		Printed Name/Signature/Date			
Tel. No./Cellphone					o./E-mail Address	