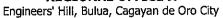


Republic of the Philippines DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS

REGIONAL OFFICE X





Name o	f Procuring Entity:		Request fo		. No.): X6-23-11-458	
Revised			Date:	November 30, 2		
Standar	d Form/Title: REQUEST FOR QUOTATIO	N	Office/End	-User: MAINTEN	ANCE DIVISION	
COMPANY NAME: ADDRESS: TEL. NO./FAX 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 am of FFB 0 6 2024, the return envelope attached herewith, to the BAC Secretariat, 2nd Floor Administration Building, DPWH Regional Office X, Engineers' Hill, Bulua, Cagayan de Oro City. 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 (1) 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. Attach Certified True Copy of PhilGeps Registration Number, Mayor's Permit and Omnibus Sworn Statement (if ABC is above 50K), Income/Business Tax Return if ABCs above P500K. 6. The Approved budget ceiling for this procurement is Php 50,333.33 7. RFQ must be signed by an authorized signatory. 8. Bidders shall submit original brochures of the product (if applicable) 9. Please indicate the brand for each items being offered.						
Item No.	ITEMS & DESCRIPTION	QTY.	UNIT	UNIT PRICE	TOTAL PRICE	
	Ball Joint Upper (LH & RH)	2	pc.	·	P	
	Ball Joint Lower (LH & RH)	2	pc.			
_	Transmission Oil Seal	1	pc.	-		
	Front Shock Absorber	2	pc.			
	Rear Shock Absorber	2	pc.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Stabilizer Link	2	pc.			
	Front Brake Pad	<u>2</u>	set			
		1	set			
	Rear Brake Pad					
$\overline{}$	Air Cleaner	1	pc.	<u> </u>		
	Cabin Filter	1	pc.			
	-888888888888888888888888888888888	••		_	<u> </u>	
	TOTAL AMOUNT					
	Please write total amount in words					
				<u> </u>	P	
					<u> </u>	
	Please specify brand name, if applicable.					
PURPOSE: For the repair and maintenance of Mitsubishi Montero MT Model: 2019. (B5-V359). Brand and Model: Warranty:						
Delivery	Delivery Period: Price Validity:					
After having carefully read and accepted your General Conditions, I / We quote you in 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.						
BAC-Secretariat: Tel. No. 853-2012			Printed Name/Signature/Date			
	Fax No. 853-2060		Tel. No./Cellphone No./E-mail Address			