

Republic of the Philippines

DEPARTMENT OF EDUCATION

Region XI

SCHOOLS DIVISION OF DIGOS CITY

Digos City

REQUEST FOR QUOTATION



Company Name		RFQ No. 22-09-117-A									
Address		-		November 3,							
Contact No.		Date and Tin	ne of Opening:	November 9,	2022 1:30pm						
TIN No.		-									
Please quote your lowest price on the item/s listed below, subject to the General Conditions, stating the shortest time of delivery and submit your quotation duly signed by your representative.		BASILIO P. MANA-AY, JR., EdD BAC CHAIRMAN									
NOTE: 1. ALL ENTRIES MUST BE LEGIBLY WRITTEN. 2. DELIVERY PERIOD MUST BE WITHIN 10 DAYS UPON RECEIPT OF PURCHASE ORDER.		For and in the absence of the BAC Chairperson: CHERRY ROSSETTE E. OLIVA									
							MUST BE WITHIN THIRTY (30) DAYS.	Ba	AC VICE-CHA	AIR	**
						4. PAYMENT TERM					
	SUBMIT CERTIFIED PHOTOCOPY OF THE FOLLOWING										
REQUIRE	D DOCUMENTS TOGETHER WITH THE RFQ:										
	a) Mayor's/Business Permit										
	b) PhilGEPS Registration c) Income/Business Tax Return										
	d) Onmibus Sworn Statement (ORIGINAL)										
NOTE: Fo	or CY 2022, bidders shall submit these documents to DepEd Digos City Division only ONCE .										
6. Approved Budget:											
	(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOUR	BID PROPOS									
ITEM NO.	ITEM & DESCRIPTION	UNIT	QTY.	UNIT PRICE	TOTAL PRICE						
1	Procurement of two (2) Units of Airconditioner	unit	2								
	Specifications:										
	Split Type Aircon, 2 HP Full Inverter										
	Wall mount										
	Uses R32 Freon for Efficiency										
	Operation Power Range										
	410a; 220V										
	3 years warranty for nPCP on Circuit Board										
	5 years warranty for Compressor & Services										
	1 year warranty on other parts and services										
	With built-in Installation Charge (10")										
											
	SUBJECT TO WITHHOLDING TAX										
	SOURCE TO WITH OLD HO TAX										
Canvassed by:			Ve quote you o	on the item/s at p	eneral Conditions, prices noted above.						
RUBEN EVARRETTA/ DOMINADOR ESPACIO/ DIANA GRACE V. AMIGO Date		Company Name Telephone/Cellphone Number									
Date		Printed M.		of Authorized I							