

Republic of the Philippines DEPARTMENT OF EDUCATION Region XI SCHOOLS DIVISION OF DIGOS CITY





REQUEST FOR QUOTATION

Company Name Address Contact No. 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. NOTE: 1. ALL ENTRIES MUST BE LEGIBLY WRITTEN. 2. DELIVERY PERIOD MUST BE WITHIN 10 DAYS UPON RECEIPT OF PURCHASE ORDER. 3. PLACE OF DELIVERY: DEPED-SCHOOLS DIVISION OF DIGOS CITY 4. PRICE VALIDITY MUST BE WITHIN THIRTY (30) DAYS. 5. PAYMENT TERM: WITHIN 30 DAYS 6. INDICATE PRICES PER ITEM AND TOTAL AMOUNT 7. BIDDERS MUST HAVE A PHYSICAL STORE WITH READILY AVAILABLE SUPPLIES IN CASE IN NEED OF POST-QUALIFICATION EVALUATION 8. BIDDERS MUST SUBMIT CERTIFIED PHOTOCOPY OF THE FOLLOWING REQUIRED DOCUMENTS TOGETHER WITH THE RFQ: a) Mayor's/Business Permit b) PhilGEPS Registration c) Bank Account Number (Photocopy of any Proof of Bank Account)		Date: October 15, 2024 Date and Time of Opening: October 21, 2024, 10:30AM MARIA GENEVIEVE T. FRANCISQUETE BAC CHAIRMAN For and in the absence of the BAC Chairperson: CLARENCE S. PILLERIN BAC VICE-CHAIRMAN			
NOTE: For 9. APPROVED BUDGE	CY 2024, bidders shall submit these documents to DepEd Digos City Division only ONCE . T: P15,000.00	1			
ITEM NO.	(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOU ITEM & DESCRIPTION			UNIT PRICE	TOTAL PRICE
Lot 2	Procurement of Services and Delivery of: (2nd Recanvass)	lot	QTY.	UNII PRICE	TOTAL PRICE
LOUZ	Procurement of Services and Denvery of. (2nd Recanvass)	101	<u> </u>	1	
	Repair and Maintenance of the 3 Clinics:				
	G. Reusora ES, Digos City Cental ES, & Rizal Central ES				
	Inclusive of:				
	5ft. Auxillary single hose, 8mm				
	10ft. Capillary single hose, 6mm				
	17ft. Single hose, 4mm				
	Labor services				
			-		
	医副性性的 1995年 1995年 1995年 1995年 1995年 1995年		G	RAND TOTAL:	
	SUBJECT TO WITHHOLDING TAX				
Canvassed by:	Vanne	After having o	I/We quote	and accepted you you on the item/s	r General Condition at prices noted abou
Date		Telephone/Cellphone Number			
		Printed !	Name/Signate	are of Authorized	Representative