

Republic of the Philippines DEPARTMENT OF EDUCATION

Region XI

SCHOOLS DIVISION OF DIGOS CITY

Digos City

REQUEST FOR QUOTATION



Company Name	RFQ No. 24-04-043				
Address	Date: April 26, 2024				
Contact No.	Date and Time of Opening: May 2, 2024, 9:30 AM				
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.	MARIA GENEVIEVE T. FRANCISQUETE BAC CHAIRMAN				
NOTE:					
1. ALL ENTRIES MUST BE LEGIBLY WRITTEN.	For and in the absence of the BAC Chairperson:				
DELIVERY PERIOD MUST BE WITHIN 10 DAYS UPON RECEIPT OF PURCHASE ORDER.					
3. PLACE OF DELIVERY: DEPED-SCHOOLS DIVISION OF DIGOS CITY	John				
4. PRICE VALIDITY MUST BE WITHIN THIRTY (30) DAYS.	IDA I. JUEZAN				
5. PAYMENT TERM: WITHIN 30 DAYS	BAC MEMBER				
6. INDICATE PRICES PER ITEM AND TOTAL AMOUNT					
7. BIDDERS MUST SUBMIT CERTIFIED PHOTOCOPY OF THE FOLLOWING					
REQUIRED DOCUMENTS TOGETHER WITH THE RFQ:					
a) Mayor's/Business Permit					
b) PhilGEPS Registration					
c) Income/Business Tax Return					
d) Omnibus Sworn Statement (ORIGINAL)					

e) Bank Account Number (Photocopy of any Proof of Bank Account)

NOTE: For CY 2024, bidders shall submit these documents to DepEd Digos City Division only ONCE. 8. Approved Budget: P 5,700.00

(FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOUR BID PROPOSAL)

ITEM NO.	ITEM & DESCRIPTION	UNIT	QTY.	UNIT PRICE	TOTAL PRICE
	Procurement and Delivery of:				
1	Wheel Alignment, for the 2 DepEd vehicles (Hi-Ace Van and Strada Pick-up)	unit	2		
2	Wheel Alignment, for the 2 DepEd vehicles (Hi-Ace Van and Strada Pick-up) Re-surface, Strada Pick-up, front disc brake	unit	1		
				-	
				-	
	SUBJECT TO WITHHOLDING TAX				
	SOMECT TO WITHHOLDING TAX				

\sim	After having carefully read and accepted your General Conditions, I/We quote you on the item/s at prices noted above.
Rent Care Les A 26/2024 Date	Company Name
	Telephone/Cellphone Number
	Printed Name/Signature of Authorized Representative
	Date: