Republic of the Philippines
DEPARTMENT OF AGRICULTURE
Regional Field Office XIII
Capitol Site, Butuan City
Tel. No: (085) 305-0092

REQUEST FOR QUOTATION

Date: _____
Quotation #: _____

_____
Name of Company

_____
Address

_____
TIN No.

Please quote your lowest price in the items/s listed below, subject to the General Conditions below, stating the shortest time of delivery. Submit your quotation duly signed by your representative not later than _____ in sealed envelope marked with the reference no. (PR# 23-07-AFD152)

7/19

JOHNNY M. CONCON
Chairman, Bids and Awards Committee

Item No.	ITEM & DESCRIPTION	BRAND MODEL	UNIT	QUANTITY	UNIT COST	TOTAL COST
	LOT 1					
	Tire - 265 / 60 R18 - LT		pcs	4		
	includes installation of tires					
	tires manufacturing dates not earlier than 2022					
	at least 1 month warranty from date of delivery					
	Wheel Alignment		lot	1		
	Wheel Balance		lot	1		
	LOT 2					
	Rack End (left & right)		set	1		
	Wiper Blade		set	1		
	Battery 11P 12V		unit	1		
	For the repair and maintenance of vehicle NIssan Navara FO W983					

ABC: 75,100.00
Source of fund: _____

General Conditions:

1. *All entries must be typewritten/printed in ink.*
2. *Delivery period within_____ calendar days based on the contract.*
3. *Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment from date of acceptance by procuring entity.*
4. *Price validity shall be for a period of _____ calendar days*
5. *PhilGEPS Registration Certificate, Business Permit, DTI Certificate and Tax Registration Certificate shall be attached upon submission of the quotation, if applicable.*
6. *Bidders shall submit original brochures showing specification of the products being offered.*
7. *Winning bidder(s) from outside Butuan City must appear personally or sent authorized representative to signed contract and claimed payments.*

After having carefully read and accepted your General Conditions, I/We quote on the item at prices noted above.

_____
Printed Name/Signature of Company

RAMIL LIMOCON
Name and Signature of Canvasser

_____
Tel. No. / CP No. / email address

_____
Date