

Republic of the Bhilippines Department of Education SCHOOLS DIVISION OF ZAMBOANGA STRUGAY

REQUEST FOR QUOTATION No. : 2025-08-286

August	28.	2025	

-		Section of the con-	122 202 202
To	AII	Fligible	Ridders

- 1. Please quote your lowest price inclusive of VAT on the items listed below, subject to the Terms and Conditions of this RFQ. Submit your
- 2. Term and Conditions
 - a. All entries must be READABLE/ TYPEWRITTEN.
 - b. Please fill up the blank section/ columns (Unit price, total price including the grand total).
 - d. Price validity must be within sixty (60) calendar days.

Note: Eligibility requirements must be attach in every Request for Quotation and duly authenticated or certified true copy for the following documents:

- · Mayor's Permit
- Philgeps Registration Member
- Income/Business Tax Return for ABCs with 500,000.00 and above
- Omnibus Sworn Statement for ABCs with 50,000.00 (for winning bidder)
- e. Warranty shall be for a period of six (6) months for supplies and materials, one (1) year for equipment and other services from date of acceptance by the procuring entity

FAILURE TO DO SO WILL MEAN DISQUALIFICATION OF YOUR BID PROPOSAL

Quotation that exceeds the Approved Budget for the Contract (ABC) shall be automatically disqualified.

MA. COLLEEN L. EMORICHA, Edd., CESO VI

BAC Chairman

Note. The Head of the Procuring Entity reserves the right to review the quotation of the bidders and reject any and all bids, declare the failure of the procurement process at any time prior to the contract award or not to award the contract pursuant to existing guidelines, without incurring any liability.

Please retur		lope and indicate the RFQ number.	Quantity	Unit Price	Total Price
Item No.	Unit	Item Specification			
		Fuel: Diesel & Gasoline	20044447		
	liter	Diesel	2986.6667		
	liter	Gasoline	1000		
		*Base on prevaling price			
		*Pre-paid payment basis			
		*Free storage, dispense upon request base on trip			
		*Philgeps registered			
	ABC	299,000.00			
Purpose: Fu	uel to be ut	illize for 4th quarter of 2025			
				2/3/2016	
Suppliers Company Name: Address:		Date:			
		Tel. No.:			
		Cell. No.:			
FIN Number: Supplier's Signature Over Printed Name:		Email Add:			
		Fax No.:			









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