

## Republic of the Philippines

## Department of Education

REGION IX SCHOOLS DIVISION OF ZAMBOANGA SIBUGAY

## REQUEST FOR QUOTATION

No.: 2024-02-049

F-1	14	2024	
February	14.	21124	

To: All I	Eligible	Bidder	1
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- 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 quotation duly signed by your authorized representative at the DepEd Division of Zamboanga Sibugay, Pangi, Ipil, Zamboanga Sibugay not later than 21/24. Receipt of at least one (1) of this quotation is sufficient to proceed with the evaluation.
- 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: Mayor's Permit and Tax Clearance must be duly authenticated or certified true copy by issuing Agency and PhilGEPS Certification.
  - 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

3. 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 processat any time prior to the contract award or not to award the contract pursuant to existing guidelines, without incurring any liability.

Please return in sealed envelope and indicate the RFO number. **Total Price Item Specification Unit Price** Item No. Unit Quantity Shock Absorber rear piece 2 piece Leaf spring bushing 8 Leaf bushing front 2 piece piece Aircon belt 1 piece Alternator belt 1 Wiper blade banna set 1 piece Swing arm bushing 4 Labor v-v-v-v-v-v-v 62,800.00 ABC Repair and maintenance of Nissan Frontier. Purpose: **Suppliers Company Name:** Date: Address: Tel. No.: TIN Number: Cell. No.: Email Add: Supplier's Signature Over Printed Name: Fax No.:



<sup>9</sup> Pangi, Ipil, Zbga. Sibugay

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