

REQUEST FOR PRICE QUOTATION
21-10-0781

Date: October 11, 2021

Purpose: for the installation of panel door for 3 cottages at CVRRCY Roma Norte, Enrile, Cagayan

The DSWD Regional Office announces its intention to purchase goods and services and invites into BID for the following:

ITEM NO	ITEM	Quantity	Unit	Price Quotation		Remarks
				Unit Price	Total Price	
1	Panel Door with Jamb	3	sets			PR# 2021-09-1617
2	2" x 4" x 12' Good Lumber	48	bdft			
3	3" Hinges (Heavy Duty)	30	pcs			
4	3/4" Square Moldings	30	pcs			
5	Door Knob (Heavy Duty)	6	pcs			
6	1" Common Nail	5	kgs			
7	Flat Latex	2	pails			
8	4" Baby Roller	5	pcs			
Total Approved Budget = P 60,410.00						

Notes:

- *This can be sent through fax. Submission must be two (2) days upon receipt. Late canvass shall be automatically rejected.
- * Price quotations must be inclusive of tax.

All interested suppliers are requested to **SUBMIT THEIR BIDS** on or before _____ to the DSWD Regional Office, Regional Center, Carig, Tuguegarao City thru:

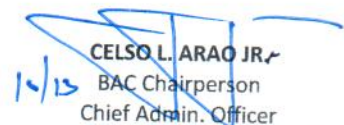
- *DSWD E-Mail Address at bacsec.fo2@dswd.gov.ph
- *DSWD Regional Bids and Awards Committee

The following suppliers' business documents are required for submission to DSWD BAC Secretariat before bid submission:

- *DTI Business registration
- *Mayor's Permit
- *TAX Clearance

Others Required: _____

Bids submitted not in consonance with the above stated date, time and place would be rejected.


10/15
CELSO L. ARAO JR.
BAC Chairperson
Chief Admin. Officer
OIC, Asst. Reg'l Director for Admin

Quoted by: _____

Canvassed By: _____

Registered Business Name _____

Canvasser _____

(Signature over printed name)

Printed Name and Signature of Owner/Authorized Representative _____

Business Address : _____

Date of Submission : _____

Contact No : _____

Terms of Payment : _____

TIN Number : _____

Philgeps Registration no. _____

ACKNOWLEDGMENT RECEIPT

Date: _____

This is to acknowledge receipt of Request for Price Quotation 21-10-0781 from the Department of Social Welfare and Development (DSWD) Field Office 02, Regional Center, Carig, Tuguegarao City, Cagayan

Name of Company/Supplier/Bidder/Service Provider: _____

Signature over Printed Name of Representative/Owner _____

Date Received _____