



REQUEST FOR QUOTATION

P.R. No.: EOM-2024-03-026

ABC: 120,000.00

Name of Supplier: _____

Address: _____

Please quote your bid price on the items / listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative in the returned envelope attached herewith

CHARMAINE V. FLORES
BAC Secretariat

- Note:
- 1) All entries must be legible.
 - 2) Service / Delivery Period within the number of days agreed upon between the supplier and the Procuring Entity.
 - 3) Warranty shall be for a period of _____ from date of acceptance by the procuring entity.
 - 4) Price validity shall be a period of at least _____ calendar days.
 - 5) PhilGEPS Registration Certificate shall be attached upon submission of the Quotation, if applicable.
 - 6) Bidders shall submit Original Brochures showing certification of the product being offered (optional).
 - 7) Mode of Delivery: [] Pick-up (Schedule) [] Freight on Board (FOB)
 - 8) Place of Delivery: **MURCIA WATER DISTRICT ADMIN BUILDING**
 - 9) Delivery Period: **within 15 days upon issuance of NOA**
 - 10) Terms of Payment: **within 30 days upon delivery**
 - 11) All items are subject to 6% VAT.

| Item No. | Unit | Item and Description | Quantity | Unit Price | Total Amount |
|----------|------|---|----------|------------|--------------|
| 1 | box | DPD FREE CHLORINE REAGENT DPD Free Chlorine Reagent Tablet form Range:0 - 5 mg/L Cl2 Quantity: 1000 pcs/box ***** Nothing Follows ***** | 8 | | |

Grand Total

Amount in Words: _____

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

Printed Name / Signature

Tel. No. / Fax No.

TIN No.

Date

Canvasser/Procurement Unit:
Lady Lee M. Alintana