

RFQ #: 2018-10-065

Date: October 17, 2018

SIR / MADAM:

May we invite your company to quote for the lowest price/s, on the items/s listed and described hereunder, with an **APPROVED BUDGET FOR THE CONTRACT (ABC) of ONE HUNDRED EIGHTY-EIGHT THOUSAND PESOS (Php188,000.00)** only, **INCLUSIVE OF VAT and ALL APPLICABLE TAXES.**

Please submit your QUOTATION to the Regional Bids and Awards Committee (RBAC), through RBAC Secretary Ms. Imelda R. Solon, through Facsimile No. (082) 234-0006 and/or email at [prc.davao@gmail.com](mailto:prc.davao@gmail.com), which shall be stamped thereon the date and time received.

The quotation must be received by the RBAC Secretariat not later than three (3) days from receipt hereof and not beyond 3:00 o' clock in the afternoon of the last day to submit the quoted price. All bids which are higher than the ABC shall be automatically disqualified.

The RBAC reserves the rights to reject any and all bid/s submitted which is/are not in accordance with the specification and those submitted after the deadline. Provided further, the supplier shall reimburse PRC in case of over pricing.

Very truly yours,

Served by:

**ATTY. MAY SUZANNE N. PUENTESPINA-CIUDADANO**  
Chairman, Regional Bids & Awards Committee

Canvasser

Date:

Quantity	Unit	Item (with specification)	Unit Cost
		<b>SUPPLY, DELIVERY AND INSTALLATION (LABOR AND MATERIALS)</b>	
		<b>OF:</b>	
1	unit	<b>Brand New Aircon 5.0 TR Floor Mounted, Non-inverter Type</b>	
		Location: <i>Confidential Printing Room</i>	
		With 5 years warranty on compressor's motor	
		1 year warranty for the other parts and accessories	
1	unit	<b>Brand New Aircon 3.0 TR Floor Mounted, Non-inverter Type</b>	
		Location: <i>Registration Section</i>	
		With 5 years warranty on compressor's motor	
		1 year warranty for the other parts and accessories	
		<b>BIDDERS SHALL VISIT THE PRC-DAVAO FOR AN OCULAR INSPECTION AND SUBMIT A LAYOUT.</b>	
		<b>NOTE: MODE OF PAYMENT: WITHIN 15 DAYS UPON ISSUANCE OF A BILLING STATEMENT, ON A BANK TO BANK BASIS, THROUGH LDDAP-ADA. BANK CHARGES SHALL BE SHOULDERED BY SUPPLIER.</b>	
		<b>VAT INCLUSIVE</b>	

Received by:

(Name & Signature of Proprietor/ Authorized Representative)  
Telephone/ Fax no.

IMPORTANT:

\*PLEASE FILL UP ALL REQUIRED DATA AND SUBMIT THE FOLLOWING:

1. PHOTOCOPY OF YOUR VALID MAYOR'S/BUSINESS PERMIT, CERTIFICATE OF PHILGEPS REGISTRATION AND INCOME/BUSINESS TAX RETURN
2. ATTACHED NOTARIZED OMNIBUS SWORN STATEMENT

\*FOR INDIVIDUALS, BIR CERTIFICATE OF REGISTRATION SHALL BE SUBMITTED IN LIEU OF DTI REGISTRATION AND MAYOR'S PERMIT.