PHILIPPINE PORTS AUTHORITY
Port Management Office of Zamboanga del Norte
Port Area, Dapitan City

Standard Form Number: SF-GOOD-60
Revised on May 24, 2004

REQUEST FOR QUOTATION

NAME OF SUPPLIER:
OFFICE ADDRESS :

QUOTATION NO.: 170-2020
DATE PREPARED: 01 July, 2020

Please quote your lowest price on the item/s 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 not later than _____.

RANDY B. VILLARTE
Supervising Supply Officer

NOTE:

1. All entries must be handwtitten or typewritten
2. Delivery period within __30_____ calendar days.
3. Warranty shall be for a period of six (6) months for supplies & materials, one (1) year for equipment , from date of acceptance by the procuring entity.
4. Price validity shall be for a period of __30_____ calendar days
5. G-EPS registration certificate shall be attached upon submission of the quotation
6. Bidders shall submit original brochures showing certifications of the product being offered.
7. Sealed canvass/quotation shall be accepted
8. All prospective bidders shall submit Mayor's/Business permit, PhilGEPS registration number and Omnibus Sworn Statement during the opening of sealed RFQ.
9. Only RFQ, if submitted personally, with the duly notarized Special Power of Attorney or Secretary's Certificate shall be accepted.

ITEM NO.	ITEM & DESCRIPTION	QTY	UNIT	PRICE/ UNIT	TOTAL AMOUNT
1	**PLASTIC JERSEY BARRIER,** WATER FILLED, ORANGE COLOR, 127CM X 46 CM X 92 CM, HIGH QUALITY, DURABLE, HEAVY DUTY (see sample picture)	36	UNIT		
2	**REFLECTORIZED TRAFFIC CONE,** Orange Color, With Rubber or Metal Base, 750mm height, branded, heavy duty (see sample picture)	36	UNIT		
	XXXXXXXX NOTHING FOLLOWS XXXXXXXX				
	APPROVED BUDGET FOR CONTRACT: PHP 342,000.00				

Brand and Model :
Warranty :

Delivery Period:
Price Validity:

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

_____
PRINTED NAME/SIGNATURE

_____
TEL NO. / CELLPHONE NO.

_____
DATE

Canvassed by: _____
Date canvassed : _____