



REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES

****Mandatory to fill in****

COMPANY NAME:	Quotation No. 21-446-11
ADDRESS:	Purchase Request No. G-2021-11-0770
CONTACT No.	Purpose: For the bulsu water refilling station - machine and delivery
TIN No.	ABC: 80,000.00
PhilGEPS Registration No.	Delivery Period: 7 Calendar Days upon receipt of Purchase Order
EMAIL ADDRESS:	

INSTRUCTIONS TO SUPPLIERS:

- Please quote your lowest price on the item/s listed below comprising the necessary taxes.
- It is mandatory to indicate the brand and/or model of the items being offered and to attach a brochure thereof whenever applicable
- Indicate the warranty period in cases of equipment or whenever applicable.
- Forthwith submit the accomplished quotation duly signed by your representative.
- Suppliers are required and mandated to attach and submit the following documentary requirements:
a) *Valid Mayor's/ Business Permit;* b) *BIR Certificate of Registration;* c) *Authority to Print Receipt;* d) *DTI/SEC Registration;* e) *PhilGEPS Membership Certificate;* and f) *PCAB License in cases of Infrastructure projects.*
- All items must conform with the internationally accepted standard and sub-standard items shall not be accepted.

ITEM NO.	ITEM & SPECIFICATION	QTY/UNIT	BRAND & MODEL OFFERED	UNIT PRICE	TOTAL PRICE
1	Standard Business Type	1 unit			
	SINGLE MOTORCYCLE				
	Engine Type: 4-stroke, overhead valve (OHV)				
	Ignition System: AC - CDI magnetic				
	Ground Clearance: 156mm or higher				
	Battery Type: 12V -5 Ah MF - WET				
	Displacement: 125cc				
	Brake Type (Front): Drum Brake				
	Fuel Tank Type: 8.6L or higher				
	Engine Oil Capacity: 1.1L				
	Starting System: Electric & Kick				
	Break Type: Mechanical Leading Trailing (Drum Brake)				
	Wheel Type: Spoke				
	Seat Height: 750mm or higher				
	Fuel System: Carburetor				
	Gear Shift Pattern: 5 Speed Constant Mesh (N1-2-3-4-5)				
	Inclusion: Insurance and 1 year LTO Registration				
	Note: Please attach brochure or sample picture if any				

Accomplished by:

Supplier's Representative
(Print name and Signature)

Date Accomplished : _____

By the authority of the University President.

DR. DOLLY P. MAROMA
BAC Chairman

Canvassed by:

Name and Signature

BulSU-OP-PU-03F3

Revision: 1

MCS 11/17/2021