

Republic of the Philippines
Province of Davao del Norte
BIDS AND AWARDS COMMITTEE
Government Center, Mankilam, Tagum City

Quotation No. : C20210627

Date : February 11, 2021

Page : 1

PR Number : 2102-0814

PURSUANT TO THE PERTINENT PROVISION OF REPUBLIC ACT NO. 9184 AND ITS IMPLEMENTING RULES AND REGULATIONS, PLEASE QUOTE YOUR UNIT, TOTAL AND GRAND/LOT PRICE OF THE ITEMS LISTED HEREUNDER, WHICH THE PROVINCE OF DAVAO DEL NORTE DESIRES TO PURCHASE. SHOULD THE BIDS AND AWARDS COMMITTEE FIND YOUR PRICE REASONABLE, RESPONSIVE AND LOWEST IN THE MARKET, YOU WILL BE OFFICIALLY NOTIFIED AS TO THE DATE OF DELIVERY. IN CASE THERE IS A FAILURE OF DELIVERY AND/OR LATE DELIVERIES, LIQUIDATED DAMAGES SHALL BE IMPOSED AND BE CHARGED AGAINST YOUR PRESENT OR FUTURE TRANSACTIONS. THE PROVINCIAL GOVERNMENT OF DAVAO DEL NORTE RESERVES THE RIGHT TO ACCEPT OR REJECT ANY BID, TO ANNUL THE BIDDING PROCESS, AND TO REJECT ALL BIDS ANY TIME PRIOR TO CONTRACT AWARD, WITHOUT THEREBY INCURRING ANY LIABILITY TO THE AFFECTED BIDDERS.

Table with 4 columns: Item No., Qty./Unit, Item, and Quotation (Unit Price | Total Amount). Row 1: 1, 150 GALS, 70% ISOPHROPHYL ALCOHOL WITH DUAL MOISTURIZER 70% SOLUTION, -ANTISEPTIC, -DISINFECTANT, -BRANDED.

* * * GRAND/LOT PRICE : P

Terms and Condition :
The following documentary requirements shall be submitted together with the Price Quotation Form or Canvass as requisite for award:
a) Mayor's/Business Permit
b) PhilGEPS Registration Number

FOR PUBLIC SCHOOLS AND BRGY'S OF DAVAO DEL NORTE
Approved Budget for the Contract : P 90,000.00
PLACE OF DELIVERY : PCL OFFICE
DATE OF OPENING OF CANVASS: February 18, 2021
TIME OF OPENING OF CANVASS: 09:00:00 AM

SUPPLIERS MUST SPECIFY/INDICATE BRAND NAMES UPON QUOTATION

VERY TRULY YOURS,
ENGR. GLENN A. OLANDRIA
(Provincial Engineer)
BAC CHAIRPERSON

I HEREBY CERTIFY:
1) THE ABOVE PRICES OF THE ITEMS HEREIN DESCRIBED ARE CURRENT AND VALID FOR 120 DAYS FROM DATE OF THE OPENING OF CANVASS.
2) IN CASE THE PROVINCE OF DAVAO DEL NORTE WILL OFFICIALLY NOTIFY THAT THE ITEMS WILL BE PROCURED FROM MY/OUR ESTABLISHMENT, THE STOCKS ARE READILY AVAILABLE OFF-THE-SHELF.

NAME OF ESTABLISHMENT
ADDRESS
Please check whether VAT or Non-VAT
V.A.T.
Non-V.A.T.
PhilGEPS Registration No.
T.I.N. No.
TEL./FAX No. :

SIGNATURE
PRINTED NAME
POSITION

CANVASS BY:
Signature Over Printed Name