



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:

1. Please quote your lowest price on the item/s listed below comprising the necessary taxes.

2. It is mandatory to indicate the brand and/or model of the items being offered and to attach a brochure thereof whenever applicable

3. Indicate the warranty period in cases of equipment or whenever applicable.

4. Forthwith submit the accomplished quotation duly signed by your representative.

5. 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.

6. 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