

Republic of the Philippines Province of Negros Occidental City of San Carlos

Telephone No. (034) 312-5205

			REQUEST FOR QUOTATION		
			REF. NUMBER	R:	0591 /
			DATE:		May 16, 2024 /
			PURCHASE RE	QUEST NO.	1-24-04-0648 /
			DATED: ABC:		April 3, 2024 /
			BAC RES. NO	TFB /	91,750 0567-24
			DATED:	. 116 /	May 16, 2024
			MILD.		181dy 10, 2024
	emen: ortest ti	Please quote your lowest price on the item/s listed below, sume of delivery and submit your quotation duly signed by your	ubject to the G	Seneral Condi	tions, stating
			*	MA. ORIT	D. REBADOMIA /
		E	BAC Secretari		DH I-PMSD nent DivCMO(Reassign
OTE:	3. 4.	ALL ENTRIES MUST BE TYPEWRITTEN / HANDWRITTEN WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPP ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY PI PRICE VALIDITY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS ALL DELIVERIES MUST BE F.O.B. SAN CARLOS CITY, NEGROS OCCID PLEASE SUBMIT YOUR QUOTATION 7 CALENDAR DAYS UP (EXCEPT FOR GASOLINE & DIESEL FUEL)	ROCURING ENT	ITY	FOR QUOTATION (RFQ)
TEM NO.	UNIT	ITEM & DESCRIPTION	QTY	UNIT	1 1/11/1
1	/pcs.	Torque Rod Bushing /	6		
1	PCS.	For use of DT #8 (ISUZU 10-WHEELERS 12 PD1) SJL 85		-	
2	pcs.	Plunger & Barrel/	8,		
3	pcs.	Delivery Valve /	B		
4	set	O - Ring Kit/	1		
5	/pc.	Cam Shaft Oil Seal	1		
	1 3535		1		
6	pc.	Primer Pump /	1		
7	1	Feed Pump Ail Sool	1 7		
8	Apc.	Feed Pump Oil Seal /	1		
0	nee	For use of DT #3 (FUSO 10-WHEELERS) SGE 986 /	0		
9	pcs.	Fuel Filter Primary /	2		
10	/pcs.	Fuel Filter Secondary /	1 .2		
		For use of D65-EX KOMATSU BULLDOZER #1 /			
11	/pcs.	Leaf Spring No.3 /	A 4		
12		Leaf Spring No.4 /	14		
13	/pcs.	Center Bolt /	/4		
14	pcs.	U - Bolt / x-x-x-x-x-x-x-x-x-x-X Delivery Term:15 Working Days /	/8		
				The second secon	
PUR	POSE	For use of various heavy equipment assigned at CED, this	City /		
			ditions 1044		ho itom/o -t
rices	noted a	After having carefully read and accepted your General Condabove.	umons, I/VVe o	luote you on t	ne item/s at
				Printed N	Name/Signature
ANV	ASSED		-	I No 10-11-1	no No /F Mail Adda
		Printed Name/Signature	Te	No./Cellpha	ne No./E-Mail Address

Date