

## Republic of the Philippines Province of Regros Occidental City of San Carlos

Telephone No. (034) 312-5205

REQUEST FOR QUOTATION  REF. NUMBER: DATE: PURCHASE REQUEST NO. DATED: ABC: Lot IV BAC RES. NO. TFB DATED: DATED: DATED: BAC RES. NO. TFB DATED: DATED					
<ul><li>3. PRICE VALIDITY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS</li><li>4. ALL DELIVERIES MUST BE F.O.B. SAN CARLOS CITY, NEGROS OCCIDENTAL</li></ul>					
<ol> <li>PLEASE SUBMIT YOUR QUOTATION 7 CALENDAR DAYS UPON RECEIPT OF REQUEST FOR QUOTATION (RFQ)     (EXCEPT FOR GASOLINE &amp; DIESEL FUEL)</li> </ol>					
ITEM	LINUT	ITEM A DECORPOSION	077/	UNIT	TOTAL
NO.	UNIT	IV. Plumbing: (Delivery Term 15 Working Days)	QTY.	PRICE	TOTAL
1	pcs	Angle Valve 1/2" x 1/2"Ø /	20		
2	sets	Back Tank Fitting Push Button Type/	/6		
3	pcs	Brass Ball Valve 1/2"Ø /	/10		
5	pcs	Chrome Lavatory Faucet / Flexible Hose 1/2" x 1/2" #12"/	30		
6	pcs	Flexible Hose 1/2" x 1/2" #12 / Flexible Hose 1/2" x 1/2" #16"/	/30		
7	pcs	Flexible Hose 1/2" x 3/8"Ø /	10		
8	pcs	Flexible Hose 1/2" x 7/8"Ø/	/20		
9	/sets	Lavatory P-Trap 1 1/4"Ø Stainless /	125		
10	pairs	Marine Epoxy 1 ltr./pair/	/2		
11		Muriatic Acid /	5		
12		Plumbing Solvent 500cc /	20		
13		Plumbing Tape 1"/ PVC Ball Valve Plain 1/2"Ø /	/30		
15		PVC Elbow Plain 1/2"Ø /	40		
16		PVC Floor Drain 4" x 4"/	10		
17	pcs	PVC Lavatory Faucet /	20		
18	1 . 1	PVC Lever Handle /	_20		
19		PVC Male Adaptor 1/2"Ø/	,30		
20		PVC Pipe Blue 1/2"/	/12		
21 22	1/	PVC Valve 1/2"Ø / PVC Wall Faucet /	15		
23		PVC Wall Faucet Plain /	20		
24		Red Flapper Valve /	10		
25		Rubber Pump /	10		
26	/pcs	Sanitary Elbow 2"Ø x 45° /	15		
27		Sanitary Elbow 2"Ø x 90° /	/20		
28		Sanitary Pipe 2" x S-900 /	12		
29 30		Sanitary Pipe 3" x S-900 / Sanitary Pipe 4" x S-900 /	10		
31		Sanitary Pipe 4 x 5-900 /	10		
01	/ 600	x-x-x-x-x-x-x	1		
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PURPOSE For Use of Repair & Maint. of Various Government Building (Materials Only)					
After having carefully read and accepted your General Conditions, I/We quote you on the item/s at prices noted above.					
Printed Name/Signature					
CANVASSED BY:  Printed Name/Signature				la./Cellphane N	la./E-Mail Address

Date