

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

Telephone Ao. (034) 312-5205

			REQUEST FOR QUOTATION			
		REI DA	F. NUMBER:		0010 January 11, 2024	
			RCHASE REQUEST NO.		1-23-11-1930	
-		DA*	TED:		November 15, 2023 394,000.00	
		BAG	C RES. NO. TED:	TFB /	0040-24 January 11, 2024	
Gentle	emen.	CITY	DISASTER	RISK REDUCT	TION & MGT. OFFICE	
		Please quote your lowest price on the item/s listed below, subje			ns, stating	
the sh	ortest tir	me of delivery and submit your quotation duly signed by your re	presentative.	-1	0	
			1	MA. BRIDA	A ADOMIA	
		BAC	Secretariat &	COADH	I-PMSD Div -CMO(Peassigned)	
NOTE:		BAC Secretariat & Procurement DivCMO(Reassigned) ALL ENTRIES MUST BE TYPEWRITTEN / HANDWRITTEN WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS,				
ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY PROCURING ENTITY						
		PRICE VALIDITY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS ALL DELIVERIES MUST BE F.O.B. SAN CARLOS CITY, NEGROS OCCIDEN	ITAL			
5. PLEASE SUBMIT YOUR QUOTATION 7 CALENDAR DAYS UPON RECEIPT OF REQUEST FOR QUOTATION (RFQ) (EXCEPT FOR GASOLINE & DIESEL FUEL)						
ITEM	UNIT	ITEM & DESCRIPTION	QTY.	UNIT	TOTAL	
NO.		Delivery Term:10 Working Days		PRICE	TOTAL	
1	unit	MOTORCYCLE (AUTOMATIC)	2			
	1	Engine Type 4-Stroke, 4-Valve, SOHC, Liquid-Cooled, eSP+	1			
		Displacement				
		155-160 cc			7	
		Starting System Electric (ACG Starter)				
		Ignition System				
		Full Transisterized Brake Type (Front)				
		Hydraulic Disc with ABS				
		Brake Type (Rear) Hydraulic Disc				
		Tire Size (Front)				
		110/80-14M/C 53P (Tubeless)				
		Tire Size (Rear) 130/70-13M/C 57P (Tubeless)				
		Wheel Type				
		Cast Wheel		4		
		Fuel Tank Capacity 8-10 L				
		Fuel System				
		PGM-FI Battery Type				
		12V - 5Ah (MF-WET)				
		Fuel Consumption				
		45.0 km/L (WMTC Test Method) Maximum Power				
		11.8 kW @ 8,500 rpm				
		Maximum Torque				
		14.7 Nm @ 6,500 rpm x-x-x-x-x-x-x-x-x-x			\$ -20 mg	
PIID	POSE	To be used by the City Disaster Risk Reduction Management C	Office.			
7 574 552						
prices	noted a	After having carefully read and accepted your General Condition	ons, I/We quo	ote you on the	item/s at	
				Printed Name	e/Signature	
CANVASSED BY:						
Printed Name/Signature			Tel.N	Tel.No./Cellphone No./E-Mail Address		

Date