Republic of the Philippines
Municipality of Lingayen
Lingayen, Pangasinan

Name of Project: Repair of One (1) Classroom at Naguelguel Elementary School, Lingayen, Pangasinan
ABC: P 50,000.00
Date: _____
Quotation No: _____

The Manager
_____
_____
_____

Please quote your lowest price on the item/s listed below, stating the shortest time of delivery and submit your quotation duly signed not later than April 28,2023. Late submission shall not be accepted.

ENGR. JOHN SILVESTER A. TAPIA
Municipal Engineer

IMPORTANT:

1. **DELIVERY PERIOD IS FORTY FIVE (45) CALENDAR DAYS**
2. **WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY**
3. **PAYMENTS SHALL BE MADE THRU CHEQUE WITHIN FIFTEEN (15) DAYS AFTER THE DELIVERY, AND SHALL BE CLAIMED PERSONALLY AT THE OFFICE OF THE MUICIPAL TREASURER**
4. **THE PRICE OFFERED SHALL NOT BE SUBJECT TO ANY INCREASE FOR WHATEVER REASON INCLUDING IN CASES OF DEVALUATION/INFLATION DURING THE ENTIRE DURATION OF THE CONTRACT**
5. **PRICE SHALL BE INCLUSIVE OF VAT**
6. **THE QOUTATION SHALL NOT BE CONSIDERED UNLESS IT IS PROPERLY SIGNED BY THE AUTHORIZE REPRESENTATIVE.**
7. **BIDDER'S MUST SUBMIT THE FF. REQUIREMENTS**
   - **A. VALID AND CURRENT MAYOR**
   - **B. SVALID AND CURRENT PHILGEPS CERTIFICATE**
   - **C. LATEST INCOME/BUSINESS TAX RETURN**
8. **COMPLETELY FILL OUT THE PRICE QUOTATION FORM, TECHNICAL SPECIFICATION/BRAND (IF APPLICABLE), UNIT/TOTAL PRICE AND SUPPLIER/BIDDER'S INFORMATION. DO NOT FORGET TO SIGN THE PRICE QUOTATION FORM**
9. **A BIDDER WHO SUBMITS A QUOTATION IS REQUIRED TO DOWNLOAD THIS RFQ FROM THE PHILGEPS WEBSITE BEFORE THE CLOSING DATE FOR INCLUSION IN THE PHILGEPS DOCUMENT REQUEST LIST (DRL).**
10. **DOWNLOADED QUOTATION MUST BE SUBMITTED THRU FAX, EMAIL OR DIRECTLY TO THE BAC SECRETARIAT ON OR BEFORE THE CLOSING DATE OF BID NOTICE ABSTRACT**

Item No.	ITEM & DESCRIPTION	QTY.	UNIT PRICE	TOTAL PRICE
1.	Repair of One (1) Classroom at Naguelguel Elementary School	1 lot		
		TOTAL		**Php**

_____
Printed Name/Signature

_____
Tel. No./Cellphone No. E-mail address

_____
PhilGEPS Registration No.

_____
Date