



Republic of the Philippines
WESTERN MINDANAO STATE UNIVERSITY
Zamboanga City
Telephone No.: 062-991-7875
www.wmsu.edu.ph

REQUEST FOR QUOTATION

The Western Mindanao State University, through its Bids and Awards Committee (BAC), is inviting PhilGEPS registered suppliers to apply for eligibility and to submit bids for the item mentioned hereunder:

Name of Project : **Supply and Delivery of Wall Fan and Water Dispenser for the CPERS of the University**

Approved Budget Cost : **Php 10,000.00**

Purchase Request No.: **20-09-204**

Closing Date: **November 19, 2020**

Description:

- | | | | |
|-----|---|------|---|
| 1.) | 1 | unit | WALL FAN
* Extremely Power Motor
* 3 Heavy Aluminum Blade
* Adjustable Tilting Angle
* 3 Speeds Rotary Wall Frame Switch
* Voltage; 220 volt/50Hz |
| 2.) | 1 | unit | WATER DISPENSER
* Hot and Cold and Normal
* High Power Stainless Steel
* Hot and Cold Tank with Extera Bottle Container |

The criteria to be used for the eligibility check of the prospective bidders, examination and evaluation of bids, post-qualification and all matters relevant to this procurement shall be in accordance with Republic Act. No. 9184 (The Government Procurement Reform Act) and its Implementing Rules and Regulations.

Interested bidders are required to submit their valid and current Mayor's Permit and PhilGEPS Registration Number, upon the submission of quotation.

Award of contract shall be made to the lowest calculated and responsive bid, which complies with the necessary description as stated above and other terms and conditions stated in the price quotation form.

Any interlineations, erasures or overwriting shall be valid only if they are signed or initiated by the bidder or his/her duly authorized representative/s.

Submission of Quotation and eligibility documents is on or before 10:00 AM of **November 19, 2020** at the BAC Office, Ground Floor Executive Building, Western Mindanao State University, Normal Road, Baliwasan, Zamboanga City. Open submission may be submitted manually, email (bacsecretariate@wmsu.edu.ph) or through facsimile at (062)991-7875.

For inquiries, you may coordinate with the BAC Secretariat at telephone no. (062)991-7875.

REQUEST FOR QUOTATION
Western Mindanao State University

Quotation No.: _____

PR No.: PR-20-09-204

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than NOV 19 2020 at 10:00 AM in the return envelope attached herewith. Any quotation submitted beyond this date will not be considered.

MA. LOURDES B. ALBA
BAC Chair

NOTE:

- 1 ALL ENTRIES MUST BE TYPEWRITTEN
- 2 DELIVERY PERIOD WITHIN **10** CALENDAR DAYS FROM THE RECEIPT OF THE PURCHASE ORDER.
- 3 WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES AND MATERIALS. ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY WESTERN MINDANAO STATE UNIVERSITY
- 4 PRICE VALIDITY SHALL BE FOR A PERIOD OF 120 CALENDAR DAYS UPON RECEIPT OF THE PURCHASE ORDER
- 5 G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION
- 6 BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED

Item No.	Qty	Unit	Item and Description	Approved Budget for Contract (ABC)	Unit Cost	Total Cost
1.	1	Unit	Wall Fan "16 <ul style="list-style-type: none"> • 3 aluminum blade • Adjustable tilting angle • Voltage; 220 volt/60Hz 	₱ 2,000.00		
2.	1	Unit	Water Dispenser <ul style="list-style-type: none"> • Hot and Cold and Normal • With extra bottle container 	₱ 8,000.00		
			<i>Note: For the CPERS.</i>			

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Total: _____

EPS Reference Number : _____

EPS Solicitation Number : _____

EPS Closing Date : _____

Brand & Model : _____

Delivery Period : _____

Warranty : _____

Price Validity : _____

After having carefully read and accepted your General Conditions, the foregoing are our price quotation for the items above indicated.

PhilGEPS Registration No.: _____

Certificate Reference No.: _____

EFREN ELIZALDE / JORGE CONCEPCION / NORBEN BORROMELO
Canvasser

Printed Name/Signature _____

Tel .No./Cellphone # _____

Date _____