POYONG	Republic of the Philippine	s
	Province of Davao del Nor BIDS AND AWARDS COMMITTE Government Center, Mankilam, Tagun	E
	(Small Value Procurement)	
		Quotation No. : C20211643
PR Number : 2103-1808	3	Date : <u>April 08, 2021</u>
		Page: 1
YOUR UNIT, TOTAL AND GRA PURCHASE. SHOULD THE BI WILL BE OFFICIALLY NOTIFIE LIQUIDATED DAMAGES SHAL GOVERNMENT OF DAVAO DE	NT PROVISION OFREPUBLIC ACT NO. 9184 AND ITS IMPLEN ND/LOT PRICE OF THE ITEMS LISTED HEREUNDER, WHICH DS AND AWARDS COMMITTEE FIND YOUR PRICE REASON D AS TO THE DATE OF DELIVERY. IN CASE THERE IS A FAI L BE IMPOSED AND BE CHARGED AGAINST YOUR PRESEN L NORTE RESERVES THE RIGHT TO ACCEPT OR REJECT / PRIOR TO CONTRACT AWARD, WITHOUT THEREBY INCURI	H THE PROVINCE OF DAVAO DEL NORTE DESIRES TO ABLE, RESPONSIVE AND LOWEST IN THE MARKET, YOU ILURE OF DELIVERY AND/OR LATE DELIVERIES, IT OR FUTURE TRANSACTIONS. THE PROVINCIAL ANY BID, TO ANNUL THE BIDDING PROCESS, AND TO
Item Qty./Unit	Item	Quotation
No. 207.701110		Unit Price Total Amount
1 1 LOT	DUAL AIRCON CLEANING AND RECHARGE FREON 134-A (LAB	OR)
	* * * GRAND/LOT PRICE : 1	P
a) Mayor's/Busin b) PhilGEPS Reg	mentary requirements shall be submitted together with the Price ess Permit gistration Number ess Tax Return (Latest)	e Quotation Form or Canvass as requisite for award:
	0/5	
Repair and maintenance of SHE Approved Budget for	965 the Contract : P10,500.00	
PLACE OF DELIVERY : (
DATE OF OPENING OF C	ANVASS: April 15, 2021	
TIME OF OPENING OF C	ANVASS: 09:00:00 AM	VERY TRULY YOURS,
	FY/INDICATE BRAND NAMES UPON QUOTATION may be a ground for disqualification.	ENGR. GLENN A. OLANDRIA
THE WINNING BIDDER S.	HALL BE REQUIRED TO SUBMIT A WARRANTY CATE DURING DELIVERY OF THE ITEM.	(Provincial Engineer) BAC CHAIRPERSON
FROM DATE 2) IN CASE TH	PRICES OF THE ITEMS HEREIN DESCRIBED AF OF THE OPENING OF CANVASS. HE PROVINCE OF DAVAO DEL NORTE WILL OFFI CD FROM MY/OUR ESTABLISHMENT, THE STOCKS	CIALLY NOTIFY THAT THE ITEMS WILL
NAME OF ESTABLISH	MENT	
Please check whether VAT	V.A.T. PhilGEPS Registration No.: Non-V.A.T.	SIGNATURE
T.I.N. No	TEL./FAX No. :	PRINTED NAME
CANVASS BY:	ure Over Printed Name	POSITION