

CITY GENERAL SERVICES OFFICE

REQUEST FOR QUOTATION (RFQ) No. 2021-06-357

NP - Small Value Procurement  
June 18, 2021

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Please quote your lowest price on the item/s listed below and submit your quotation together with the requirements stated hereunder to this office located at Room 442, Manila City Hall Building, Arroceros Street, Manila during office hours within seven (7) calendar days from receipt hereof, subject to the following terms and conditions, to wit:

1. If applicable, indicate the specific brand, model/year and country of origin for such item.
2. Delivery period shall be as per schedule upon receipt of Purchase Order.
3. Warranty shall be for a period of three (3) months for supplies and materials, one (1) year for equipment from date of acceptance by the end-user.
4. Price validity shall be for a maximum period of 120 calendar days.
5. Subject to the submission of the following documents:
  - a. DTI/ SEC Certificate of Registration
  - b. Mayor's/Business Permit
  - c. PhilGEPS Registration
  - d. Income/Business Tax Return
  - e. Omnibus Sworn Statement

Canvassed By:

NENITA C. FLORES  
Acting Supply Officer I

THELMA L. PEREZ  
Officer-In-Charge

ITEM	QTY.	UNIT	ARTICLE AND DESCRIPTION	CEILING PRICE	UNIT PRICE	TOTAL
			Office: Ospital ng Sampaloc Charge to: Repairs and Maintenance- Other Machineries and Equipment	P.R. No. 955 ABC: Php285,000.00		
	1	lot	Repair and Rehabilitation of Elevator (Passenger)	Php 285,000.00	Php _____	Php _____

**Scope of Work:**

1. Inspection and Assessment of all Parts
2. Lubrication of Main Rail and Counter Weight Mechanism and adjust if needed
3. Replacement on Ninety One (91) pcs. Power Relay, 24 Volts
4. Testing and adjustments for owners acceptance

Warranty: Three (3) months upon turn-over of equipment  
for parts supplied and workmanship

XXXXXXXXXXXXXX

Total:

Php \_\_\_\_\_

After having carefully read and accepted your terms and conditions, I/We hereby quote on the items/s at prices listed above

\_\_\_\_\_  
Printed Name/Signature

\_\_\_\_\_  
Tel. No/Cellphone No.  
e-mail address

\_\_\_\_\_  
Date