



REPUBLIC OF THE PHILIPPINES
DEPARTMENT OF BUDGET AND MANAGEMENT
BONCODIN HALL, GENERAL SOLANO STREET, SAN MIGUEL, MANILA

REQUEST FOR QUOTATION

The Department of Budget and Management (DBM), through its Administrative Service (AS), will undertake a Small Value Procurement for the “ *One Thousand (1,000) kilometer Check-Up for Toyota Innova 2013*”, in accordance with Section 53.9 of the Implementing Rules and Regulations of Republic Act No. 9184.

Name of Project : Kilometer Check-Up for Toyota Innova 2013

Approved Budget for the Contract : Seventy One Thousand One Hundred Twenty Pesos (71,120.00)

Specifications : 1,000 Kilometer Check-Up for Fourteen (14) units of Toyota Innova 2013

Location : G/F, DBM Bldg. III, Gen. Solano St., San Miguel, Manila

Delivery Date : Fifteen (15) working days upon receipt of the Notice to Proceed

Interested suppliers are required to submit their valid and current Mayor's Permit and PhilGeps Registration Certificate, and price quotation (Annex "A").

Submission of quotation and eligibility documents is on or before 5:00p.m. of 24 April 2014 at the Administrative Service, Ground Floor, DBM Bldg. III, Gen. Solano St., San Miguel, Manila. Open submission may be submitted, manually or through facsimile at fax nos. 735-4979 / 735-1957.

For inquiry, you may contact us at tel. nos. 735-4979 or 490-1000 locals 3114, 3115 & 3117.

Very truly yours,

ATTY. SOFIA C. YANTO
Director, Administrative Service

PRICE QUOTATION FORM

Date

The Administrative Service
Department of Budget and Management
Ground Floor, DBM Bldg. III, Gen. Solano St.,
San Miguel, Manila

Sir/Madam:

After having carefully read and accepted the terms and conditions in the Request for Quotation, hereunder is our quotation/s for the item/s as follows:

Description	Specification	Qty	Unit Price	Total Price
Kilometer check-up	1,000 kilometer check-up for Toyota Innova 2013	14		
TOTAL PRICE				

(Amount in Words) _____

The above-quoted prices are inclusive of all costs and applicable taxes.

Very truly yours,

Name/Signature of Representative

Name of Company

Contact No.