

# Republic of the Philippines SOUTHERN LUZON STATE UNIVERSITY Lucban, Quezon

#### REQUEST FOR QUOTATION

#### AIR PURIFIERS (COM)

Purchase Request No. 2023-04-0966
Approved Budget for the Contract: # 228,000.00

The Southern Luzon State University through the Bids and Awards Committee invites interested firms/supplier to submit quotation for the procurement of <u>Air Purifiers (COM)</u> to apply the sum of <u>Two Hundred Twenty-Eight Thousand Pesos Only (P 228,000.00)</u> inclusive of VAT, being the Approved Budget for the Contract (ABC), details as follows:

| Qty. | Unit | ITEM/S DESCRIPTION                    |  |  |
|------|------|---------------------------------------|--|--|
| 6    | unit | Air Purifiers                         |  |  |
|      |      | *see attached picture/s for reference |  |  |

1. The quotation must be submitted (can also be send thru email at the contact details listed below) or to the Office of the Procurement Office/Bids and Awards Committee, Southern Luzon State University, 2<sup>nd</sup> Flr. Hermano Puli Building, and shall be received by the Committee.

E-mail: slsuprocurement2021@gmail.com

2. The SLSU reserves the right to reject any or all quotations and/or proposals and waive any formalities/informalities therein and to accept such bids it may consider as most advantageous to the agency and to the government. Southern Luzon State University SLSU neither assumes any obligation for whatsoever losses that may be incurred in the preparation of bids, nor does it guarantee that an award will be made.

Maridel C. Zabella
OIC, Progurement office
Southern Luzon State University
Lucban, Quezon

Tel. No.: (042)540-6519



## Republic of the Philippines SOUTHERN LUZON STATE UNIVERSITY Lucban, Quezon

### REQUEST FOR QUOTATION

| Office/End-User: COLLEGE OF MEDICINE Date:  |           |       |  |  |            |  |  |  |  |
|---|-----------|-------|--|--|------------|--|--|--|--|
|   | ANY NAM   | E:    |  |  |            |  |  |  |  |
| ADDRESS :   |           |       |  |  |            |  |  |  |  |
| TEL. N  | O./FAX N  | 0. :  |  | TIN No.:   |            |  |  |  |  |
| Please quote your lowest price on the item(s) listed below, subject to the Terms & Conditions stated below and submit your quotation duly signed by your representative in the return envelope attached herewith to the Procurement office.    TERMS and CONDITIONS   1. All entries must be typewritten or legibility written.   2. Delivery period within upon conforme of the approved Purchase Order (P.O).   Administratitive penalties to Sec. 69 of the Revised IRR-RA 1984 shall be imposed for non-delivery without valid reason.   3. Warranty shall be for a minimum of three (3) months for Supplies & Materials; (1) one year for Equipment from date of acceptance by the end-user.   4. Price validity shall be for a period of sixty (60) calendar days.   5. Suppliers required to submit updated documents yearly such as G-EPS Resgistration,   Certificate of Tox, Mayor's Permit, DTI, Bank Name/Account and Branch for evaluation of the Procurement Office upon submission of the quotation.   6. Bidders shall submit complete specifications showing products certification, if applicable.   7. Please indicate the brand for each items being offered.   8. The Approved budget celling for this procurement isPHP 93,600.00 |           |       |  |  |            |  |  |  |  |
| Item#   | Qty.      | Unit  | ITEM/S DESCRIPTION   | Unit Price   | Total Cost |  |  |  |  |
|   | 6         | unit  | Air Purifiers  |  |            |  |  |  |  |
|   |           |       |  |  |            |  |  |  |  |
|   |           |       | *see attached picture/s for reference  |  |            |  |  |  |  |
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|   |           |       |  |  |            |  |  |  |  |
| Source  | of Fund:  |       |  | Warranty:  |            |  |  |  |  |
| Delivery<br>After having  | Period:   |       | d your Genaral Conditions, We quote you on the item(s) at prices note above.<br>nditions specified by SLSU Procurement Office. | Price Validity:  Price Validity:  Price Validity:  Price Validity are left blank, it |            |  |  |  |  |
| ΔFΔ-DRC   | 1 02 52 5 | REV A |  | Printed Name/Signature/Date  |            |  |  |  |  |
| AFA-PRC-1.02 F2, REV. 4   |           |       |  |  |            |  |  |  |  |

