

Republic of the Philippines  
**BIDS AND AWARDS COMMITTEE**  
 (Goods and Services)  
 City Government of Baguio  
 Baguio City

Standard Form No.: SF - GOODS-60  
 Revised on: September 5, 2016  
 Standard Form Title: Request For Quotation

Reference No: 32823  
 Solicitation No: 86 Price  
 Verification  
 Date: September 17, 2021  
 OBR #

Sir/Madam:


Please quote your price of items listed below as per specifications, stating the shortest time of delivery. Please submit your quotation duly signed by you or your representative to the Bids and Awards Committee not later than 2:00 PM \_\_\_\_\_ c/o the BAC Secretariat, City General Services Office, City Hall, Baguio City. you may fax your quotations through Telefax No. (074)424-5148.

We may purchase the item/s from your company if the offer is found to be reasonable and advantageous to the City Government of Baguio. But we reserve the right to accept or reject the offer or all quotation found not in order.

Thank you very much.

**NOTE:**

**"PLEASE SEAL YOUR BIDS"**

  
**ATTY. LETICIA O. CLEMENTE**  
 BAC Chairperson and City Budget Officer

ITEM NO.	QTY	UNIT	DESCRIPTIONS	TOTAL ABC	BID PRICE /UNIT	TOTAL BID PRICE
1	1	LOT	Drinking Water c/o DRRM	90,000.00		
	3000	gallon	Drinking Water - Drinking Water - 5 gals. Capacity in Water Container Bottle Note: Inclusive of pick-up and delivery of drinking water at the following isolation units: 1. Sto. Nino Hospital - 1,500 bots. 2. Teacher's Camp - 1,500 bots. / Submit: Certificate of Water Potability Rest assured that all empty bottles will be disinfected (at isolation units) before its call for refill.		30.00	

PURPOSE: For pick-up and delivery of drinking water at the isolation units (BCCIU, BTCIU) c/o HSO.

- NOTED:
- 1) Delivery Period within calendar days
  - 2) price Validity shall be for a period of \_\_\_\_\_ calendar days
  - 3) Warranty (for equipments) \_\_\_\_\_ Minimum of 1 year
  - 4) Bid Price should be inclusive of VAT and delivery charges
  - 5) Please indicate the brand of your offer. For machines/equipment, please attach brochure.
  - 6) Unit prices must not exceed indicated line item price.

\_\_\_\_\_  
 Name of Establishment

\_\_\_\_\_  
 Philgeps Registry No.

\_\_\_\_\_  
 Printed Name and Signature of Bidder

\_\_\_\_\_  
 Address and Contact Number

\_\_\_\_\_  
 TIN