



REQUEST FOR QUOTATION FOR THE PROCUREMENT OF GOODS AND SERVICES

Mandatory to fill in	
COMPANY NAME:	Quotation No. 23-05-214
CONTACT No.	Purchase Request No. I-2023-05-0064
Address:	Purpose: For office use
TIN No.	ABC: 60,000.00
PhilGEPS Registration No.	Please indicate days of delivery: _____ Calendar Days upon receipt of Purchase Order
EMAIL ADDRESS:	

INSTRUCTIONS TO SUPPLIERS:

- 1. Please **quote your lowest price** on the item/s listed below **comprising the necessary taxes**.
- 2. It is mandatory to **indicate the brand** and/or **model** of the items being offered and to **attach a brochure** thereof whenever applicable
- 3. Indicate the **warranty period** in cases of equipment or whenever applicable.
- 4. Forthwith submit the accomplished quotation **duly signed by your representative**.
- 5. Suppliers are required and mandated to attach and submit the following documentary requirements:
a) Valid Mayor's/ Business Permit; b) BIR Certificate of Registration; c) Authority to Print Receipt; d) PhilGEPS Membership Certificate and e) Omnibus Sworn Statement
- 6. All items must conform with the **internationally accepted standard** and **sub-standard items shall not be accepted**.

ITEM NO.	ITEM & SPECIFICATION	QTY/UNIT	BRAND & MODEL OFFERED	UNIT PRICE	TOTAL PRICE
1	2.5Hp Split-type inverter ACU	1 unit			
	Cooling Capacity (min-rated-mix) Kj/h:				
	4,009-22,683-25,109 or higher				
	Power Input (min-rated-max) watts:				
	230-1,850-2,600				
	EER (Kj/h)/W: 10.0 or higher				
	Refrigerant Type: R32				
	Rated Voltage : 230/60Hz				
	Minimum if One (1) Year Warranty Parts and Services				
	Minimum of Five (5) Years Warranty Compressor Motor				
	with Free Installation back-to-back First Ten (10) feet				
	with Outdoor Unit Mounting				
	With Drainage system from unit to ground				
	With nema and breaker				
	Location: COE Building room 209				
	NOTE: Please attach brochure and indicate days of delivery				

Accomplished by:	By the authority of the University President.
<div>Supplier's Representative (Print name and Signature)</div>	<div>DR. DOLLY P. MAROMA BAC Chairman</div>
Date Accomplished : _____	Canvassed by:
	<div>Name and Signature</div>

BulSU-OP-PU-03F3
Revision: 1
JAM 5-10-2023