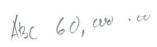
BASES CONVERSION and DEVELOPMENT AUTHORITY

2/F Bonifacio Technology Center, 31st Street Bonifacio Global City, Taguig City Tel. No. 575-1700 loc. 1782/1784

Fax No.: 575-1785 Email: samateo@bcda.gov.ph REQUEST FOR QUOTATION



(Com	pany N	ame):	Date: 30 August 2018 Quotation Number: PR# 106				
Pl	ease qu	ote your lowest price(s) using this form, or your letterhead. Also,	, take note of the fo	llowing details:	·		
D	2) Sen 3) Quo 4) The	station/s shall be addressed to the Head of Procurement Division. It the said quotation/s to BCDA or fax the same at no. 575-1785 restation/s submitted after the set deadline indicated in item no. 2 quotation/proposal shall be properly signed by the authorized re	not later than <u>03 Se</u> shall not be accepte presentative and/or	ptember 2018 ed/considered.			
В	as may refuse	erves the right to accept or reject any or all of the quotations, on the considered most advantageous to the gov't., or to pursue approperation to accept the award without justifiable reason/s. NY A. MATEO SSOT	to the gov't., or to pursue appropriate legal action should the w			(18)	
TO:		HEAD OF PROCUREMENT				8	
QTY (A)	UNIT	est, below is/are the price(s) of the article(s)/service(s) as indicated DESCRIPTION/SPECIFICATIONS	UNIT COST (ex- VAT) (B)	: VAT (C)	TOTAL UNIT	TOTAL AMOUNT (AxD)	
2	PC	AIRCON EXPANSION VALVE					
2		FILTER DRIER RECEIVER					
2	78.000	AUXILIARY FAN MOTOR					
1	PC	THERMOSTAT CONTROL			-		
	-	ALL ODICINAL BARTS ONLY					
	-	ALL ORIGINAL PARTS ONLY				-	
	-	For Hyundai Coaster 2013 with plate no. SLA-136					
		Chassis# KMJHG17BPDCO59182 / Engine# D4DB531212					
				-	TOTAL AMOUNT	T _a	
					TOTAL AMOUNT	₹	
Term		conditions: Inclusive of all applicable taxes					
Payment: NET Thirty (30) working days							
Delivery: Validity of price : one (1) month							
	WARR	ANTY: at least one (1) year					
W	e hereb	y certify, that we have prepared, checked and reviewed this quo	tation.			7	
Th	nis quot	ation is valid unless revoked in writing which should be done prior	r to our receipt of th	ne Purchase Ord	der or Job Order.		
Prir	nted Na	me/Signature/DATE Immediate Supervisor	sor Telephone / Fax Number				