

DEPARTMENT OF TOURISM
National Capital Region
Telefax: 8553-3530
Direct Line: 8553-3531/09190990025
Email: dotncr.bac@tourism.gov.ph

Date: April 26, 2025

GENTLEMEN:

REQUEST FOR QUOTATION

Kindly quote to us your latest price(s) on the following item(s):

QUANTITY	UNIT	ITEM/DESCRIPTION/SPECIFICATION	UNIT PRICE
		PROJECT NAME : PREVENTIVE MAINTENANCE / CHANGE OIL	
One (1)	Unit	PURPOSE: For preventive maintenance service/ change oil of DOT–NCR service vehicle 2018 Toyota Innova with Plate Number SJN 757 Inclusions: <ul style="list-style-type: none">✓ 8 Liters Engine Oil (Fully Synthetic)✓ 1 Oil Filter✓ 1 Air Cleaner✓ 1 Flushing Oil✓ 1 Fuel Filter✓ 1 Cabin Filter Note: Labor (included) <ul style="list-style-type: none">✓ Change fuel filter✓ Change Oil✓ Cleaning of 4 brakes	
		<u>REQUIREMENTS FOR SUPPLIERS</u> <ul style="list-style-type: none">• Quoted price to include labor and applicable taxes• Willing to engaged in send-bill arrangement	
		DOCUMENTRY REQUIREMENTS TO BE SUBMITTED: <ol style="list-style-type: none">1. Current Mayor’s/Business Permit2. PhilGEPS Registration Number	
		Approved Budget for the Contract (ABC): Php 12,200.00 Pesos : Twelve Thousand Two Hundred Only <small>* inclusive of all applicable taxes, EVAT/VAT/government taxes/service charge/and other applicable taxes and charges net upon completion of the project and delivery of all requirements as agreed upon. Government procedure and subject to appropriate government taxes</small>	
		CONTACT PERSON: Mr. Mauricio C. Angeles, Jr. - bongchamp_angeles@yahoo.com Mr. Lawrence Alcantara - ljalcantara@tourism.gov.ph	
		Please quote your lowest price for the above requirements and submit your quotation along with documentary requirements VIA PERSONAL SERVICE AND/ OR COURIER in three (3) original sets IN A SEALED ENVELOPE to this office address: DOT NCR BAC SECRETARIAT Mr. Lawrence J. Alcantara – Head, NCR BAC Secretariat 7840 Makati Avenue, Poblacion, Makati City	
		Note: Deadline of submission is on May 02, 2025 at 08:00 am	

This office desires to place an order for the above item(s) with the minimum delay. Your firm quotation will help us very much in placing the order.

Thank you

PRINT NAME OF DEALER/SUPPLIER

ADDRESS OF DEALER/SUPPLIER

CONTACT NUMBER(s)

Email Address

TIN:

LANDBANK ACCOUNT NUMBER

AUTHORIZED SIGNATURE OVER PRINT NAME