

Republic of the Philippines
City Government of Cagayan de Oro
BIDS AND AWARDS COMMITTEE (BAC) - GOODS
City Hall, Cagayan de Oro City

REQUEST FOR QUOTATION (NEGOTIATED 53.9 SMALL-VALUE OF THE 2016 RIRR OF RA 9184)

Supply and Delivery of Freezer 6 cu. ft. & Other Items; PR No. 21-0748 dated January 25, 2021

Date : March 26, 2021
Quotation No. : 0774-21

Company Name

Address

Please quote your lowest price on the item/s listed below, subject to the General Conditions on this page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than 2:00PM on March 29, 2021 in the return envelope attached herewith.

By Authority of the BAC:

TEODORO A. SABUGA-A, JR.
BAC Chairperson

- NOTE:**
1. DELIVERY PERIOD WITHIN **SEVEN (7) CALENDAR DAYS**
 2. WARRANTY SHALL BE FOR A PERIOD OF THREE (3) MONTHS FOR SUPPLIES & MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY;
 3. PRICE VALIDITY SHALL BE FOR A PERIOD OF 90 CALENDAR DAYS;
 4. PhilGEPS REGISTRATION CERTIFICATE/NUMBER SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION;
 5. SUBMIT CURRENT AND VALID MAYOR'S/BUSINESS PERMIT
 6. SUPPLIERS FOR EQUIPMENT SHALL SUBMIT BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCT BEING OFFERED; AND
 7. DULY NOTARIZED OMNIBUS SWORN STATEMENT PRIOR TO ISSUANCE OF NOTICE OF AWARD.

Item No.	ITEM & DESCRIPTION	BRAND & MODEL	QTY	UNIT PRICE
	Supported graphics resolutions: 3840 x 2160			
	Display diagonal (metric): 139 cm			
	Digital signal format system: DVB-C,DVB-S2,DVB-T2			
	Web OS Operating system installed			
	2 Speakers built in			
	WIFI and Ethernet LAN Connection			
	Bluetooth, Miracast, Web Browsing network			
	High Dynamic Range (HDR) technology supported			
	Ports: 3 HDMI Version: 2.0			
	Ethernet LAN (RH-45) port			
	2 USB 2.0 ports and RF ports			
	Component video (YPbPr/YCbCr) in			
	Intel Wireless Display (WiDi) Technology			
	2 Year Warranty on Parts and Service			
	for EREID Facility: Doctors Quarter, Nurse Quarter,			
	Conference Room, Severe Patient Ward, Moderate			
	Patient Ward, Mild Patient Ward			
	X-X-X-X-X			

PhilGEPS Registration Number: _____

After having carefully read and accepted your General Conditions, I/we quoted you on the item at prices noted above.

Printed Name / Signature / Designation

Tel. No. / Cellphone No. / E-mail Address

Date

