

#### Republic of the Philippines METRO KIDAPAWAN WATER DISTRICT

Telnos. (064)577-1533, 577-1865, Fax # (064) 572-5555
E-mail Address: metrokidapawan wd@yahoo.com
Website: www.metrokidapawanwd.gov.ph
"Committed to Service, Development and Self-Reliance"





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### REQUEST FOR QUOTATION

| r No. :   |  |   |   |                              |   |                          |  |                                     |                                     |
|---|--|---|---|------------------------------|---|--------------------------|--|-------------------------------------|-------------------------------------|
| IO No. :  | 0223-0027  |   |   |                              |   |                          | D  | ATE :                               |                                     |
| Name of Address:  | Company:   |   |   |                              |   |                          |  |                                     |                                     |
|   | Permit No:   |   |   |                              |   |                          |  |                                     |                                     |
| IN No.:   | _  |   |   |                              |   |                          |  |                                     |                                     |
| dorsal  <br>not late  | Please quote your best offer portion of this Request for Quoer than, 2023.   | for the item/s o<br>tation. Submit yo   | lescrib<br>our quo                        | ed be                        | ow, subject<br>duly signed  | to the Terr<br>by you or | your du  | lly guillings<br>MY P. MOI          | ized represent                      |
| After<br>follows:   | having carefully read and ac   | cepted the Term   | s and                                     | Condi                        | tions below, I  | /we subm                 | it our qu                                      | urement<br>uotation/                | Assistant A<br>s for the item/      |
|   |  | Approved  |   |                              |   | OF                       | FER  |                                     |                                     |
| ITEM #  | ITEM DESCRIPTION   | Budget of the contract  |   |                              |   |                          | Compliance<br>with technical<br>specifications |                                     | REMARKS                             |
|   | PhP:   |   | QTY.                                      | UNIT                         | UNIT PRICE  | TOTAL                    | YES  | NO                                  |                                     |
|   | 1 LOT HIRING OF JOB ORDER<br>FOR PIPES AND FITTINGS IN<br>FOR THE REHABILITATION OF<br>BOX AND TL  | STALLATION  |   |                              |   |                          |  |                                     |                                     |
|   | INCLUSION: - 1 LOT - PIPES AND FITTINGS - 1 LOT - PIPE ENCASEMENT - 1 LOT - STEEL WORKS - 1 LOT - SPECIAL SERVICES   | S INSTALLATION<br>ACTIVITY  |   |                              |   |                          |  |                                     |                                     |
|   | (SEE ATTACHED TERMS OF R   | REFERENCE)  |   |                              |   |                          |  |                                     |                                     |
| Pr  | pbmit the following requirem layor's Permit rofessional License/Curriculum nilgeps Registration Number   |   | ces)                                      |                              | PCAB License<br>Income Busin<br>Omnibus Swo                             | ess Tax Re               |  |                                     |                                     |
| . The mo<br>. Bidder<br>. Bidder  | ERMS AND CONDITIONS:  ode of payment is within Six  s shall provide correct and acc s may quote for any at all times quotation/s must have:  | Juliu e information   | TRAIL                                     | ired in                      | thic torm   | 2)months<br>12 months    | One upon                                       | e (1)mon                            | th.                                 |
| - ii  | validity - Thirty (30) Calenda<br>nclusion of tax<br>Quotations exceeding the A<br>Award of contract shall be n<br>crasures or overwriting is not  | pproved Budge<br>nade to the low<br>allowed unless:   | rest qu<br>signed                         | d by d                       | on ( tor good<br>ulv authorize  | ds and se                | rvices)  | 0/0                                 |                                     |
| The item<br>tice of A<br>The awa<br>The MKW<br>Liquidate<br>Scribed<br>sount of | /s shall be delivered within ward (NOA) and Job Order Coardee shall notify two (2) days be /D shall have the right to inspect damages equivalent to one delivery period shall be impossible indicated damages reaches and remedies open to it. | Hy-turo _(12) days / mo portract & Notice of the fore its delivery of and/or to test the tenth of one possed per day of | onths for a second of good he good ercent | rom read (NC) ods and ods to | ceipt of Notice<br>(A).<br>d services.<br>confirm their<br>%) of the va | conformity               | eed (NTF<br>to the                             | P) with Pu<br>technica<br>not deliv | ll specification<br>rered within th |

of action and remedies open to it.



# Republic of the Philippines

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Page 2 of 2

# REQUEST FOR QUOTATION

|  | 0223-0027  |   |  |   |                               | D  | A         |                                 |
|--|--|---|--|---|-------------------------------|--|-----------|---------------------------------|
| O No. :  | 0220 0027  |   |  |   |                               | D,                                       | ATE :     |                                 |
| lame of  | Company:   |   |  |   |                               |  |           |                                 |
| ddress:  | Permit No:   |   |  |   |                               |  |           |                                 |
| IN No.:  | -  |   |  |   |                               |  |           |                                 |
| dorsal p<br>not late   | Please quote your best offer portion of this Request for Quoer than, 2023.   | for the item/s of tation. Submit yo                                       | described be<br>our quotation                      | low, subject t<br>duly signed t         | o the Terr                    | ns and (<br>your dul                     | ly author | ns provided of<br>ized represen |
| After<br>ollows:   | having carefully read and ac   | ccepted the Term  | ns and Condi                                       | tions below, I,                         | /we submi                     | Procu<br>it our qu                       | orement . | Assistant A<br>s for the item/  |
|  |  | Approved  |  |   | OFF                           | FER                                      |           |                                 |
| ITEM #   | ITEM DESCRIPTION   | Budget of the contract  | PRICE  |   |                               | Compliance with technical specifications |           | REMARKS                         |
|  | PhP:   |   | QTY. UNIT  | UNIT PRICE                              | TOTAL                         | YES                                      | NO        |                                 |
|  |  |   |  | GRAND T                                 | OTAL:                         |  |           |                                 |
|  |  |   |  |   |                               |  |           |                                 |
|  |  |   |  |   |                               |  |           |                                 |
|  |  |   |  | Signature                               | Over Printe                   | ed Name                                  | e:        |                                 |
|  |  |   |  | _                                       |                               |  |           | e)/Email Add                    |
| 1010   | <b>bmit the following requirem</b> ayor's Permit ofessional License/Curriculum   |   |  | Contact N                               | umber (La                     | andline/(                                |           | e)/Email Add                    |
| □ Pro  | <b>bmit the following requirem</b> ayor's Permit ofessional License/Curriculum hilgeps Registration Number   |   | ces)   | Contact N  Contact N  PCAB License      | (Infra)                       | andline/(                                |           | e)/Email Add                    |
| Properties of the properties o | ofessional License/Curriculum ofessional License/Curriculum of the control of the | (Consulting Service  (6) months Transfer and the curate information one ( | nree (3)month                                      | PCAB License Income Busine Omnibus Swor | (Infra)<br>ess Tax Ret        | andline/(<br>turn<br>ents                | Cellphon  |                                 |
| Properties of the properties o | ofessional License/Curriculum pilgeps Registration Number  ERMS AND CONDITIONS:  ade of payment is within Six is shall provide correct and according and applications are six in the six in | (6) months The curate information is except for one (                     | nree (3) month<br>required in<br>(1) lot requisiti | PCAB License Income Busine Omnibus Swor | (Infra) ess Tax Ret n Stateme | ondline/onents  One woon;                | Cellphon  | e)/Email Addi                   |



PURPOSE

## epublic of the Philippines METRO KIDAPAWAN WATER DISTRICT

Lanao, Kidapawan City

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ISO 9001:2015 Certified Cert. No. 66478

# **TERMS OF REFERENCE**

| PURPOSE   | REHABILITATI                                    | ON OF ILIA         | N INTAKE BOX         | AND TI     |                           |                      |  |  |
|---|---|--------------------|----------------------|------------|---------------------------|----------------------|--|--|
| PARTICULARS   | □PR ■JON  |                    |                      | Dat        |                           |                      |  |  |
|   |   |                    | TIONS, AND DE        |            |                           | February 23, 2023    |  |  |
| ITEM 1 1 LOT HIRING OF J  | OB ORDER CO                                     | ONTRACTEC          | OR PIPES AND E       | TTINO      | CINICTALLATI              |                      |  |  |
| specifications/inclusion:  1 1 lot - Pipes and Fitting Pipes 200mm - 175 Fittings 200mm - 96 2 1 lot - Pipe Encasement 3 1 lot - Steel Works Incl. Rental of Porto 4 1 lot - Special Services Tarpaulin Printing Surface/Road Resto Clearing and Stakin  ** Nothings follows ** | gs Installation pcs pcs nt Activity able Genset | 1                  |                      | TTING      | S INSTALLATI              | ON                   |  |  |
| Note: For more than 6 Items attach se   | parate TOR Form.                                | For More specif    | ications attach nece | essary sup | oporting docume           | (Page 1 of           |  |  |
| SOURCE OF FUND  |   |                    | MP Item No.:         | T          |                           |                      |  |  |
| TO REE OF TONE  |   | Accoun             |                      |            |                           |                      |  |  |
| MODES AND TERMS OF PAY  | MENT  | Progress           | billing payable v    | vithin 1:  | 2 months upo              | on issuance of I.A.R |  |  |
|   |   | Release            | of Retention B       | ond u      | pon letter re             | equest approval      |  |  |
| Free Delivery   |   | REQUII             | RED SERVICES         |            |                           |                      |  |  |
| Free Installation  EQUIRED CERTIFICATIONS/  | PERMITS   | Business<br>MANUFA | Permit, PhilGEP      | S Regi     | istration<br>TI CERTIFICA | TE                   |  |  |
| UALIFICATIONS   |   | IN/A               |                      |            |                           |                      |  |  |
| REA OF DELIVERY   |   |                    |                      |            |                           |                      |  |  |
| ATE OF DELIVERY (MATERIA<br>ME OF DELIVERY  | LS)   |                    |                      |            |                           |                      |  |  |
| ARRANTY PERIOD  |   | One (1) Y          | 'ear                 |            |                           |                      |  |  |
| TENTION   |   | Amount:            |                      |            | 10%                       |                      |  |  |
| X INCLUSIVE   | Duration:                                       | dod in ADC         |                      | 1 month    |                           |                      |  |  |
|   | OTHER   |                    | ded in ABC           |            |                           |                      |  |  |
|   | OINER   | CONDITION          | NS AND CONST         | RAINTS     |                           |                      |  |  |
| epared by:  |   |                    | Reviewed by:         |            | 1                         |                      |  |  |
| KELVIN E. RUP   |   |                    | RA                   | MIL A.     | CONDEZ, C                 | E, RMP, MBA          |  |  |
| Division Mapag  | er A-PDD  |                    | 1                    | Depa       | rtment Manag              |                      |  |  |
| 477   |   |                    | Approved/Disa        | pprove     | ed by:                    |                      |  |  |
| WILESPER LISANDRO M. ALC  |   | MP, MBA            |                      | STELLA     | M. GONZA                  | LES, MPS             |  |  |
| AGM for Ope   | rations   |                    |                      |            | General Mana              | iger                 |  |  |