PHILIPPINE PORTS AUTHORITY

PORT MANAGEMENT OFFICE SOCSARGEN

Port Area, Makar Wharf, General Santos City
Tel. No.: (083)552-4484; 301-8671; FAX No. (083)552-4446; 301-2076; 301-2078

Standard Form Number: SF-GOOD-60

Revised on May 24, 2004

Standard Form Title: Request for Quotation PR NO. GEN-7200-23

Date

PR NO.

REQUEST FOR PRICE QUOTATION

NAME OF SUPPLIER Office Address		RPQ NO.	Q NO. 1102001-23 te Prepared: 11/8/2023		
	Please quote your lowest price on the item/s listed below, subjet the shortest time of delivery and submit in a sealed envelope, you	ct to the Gene	ral Condition o	n the last page, u/authorized	
repres	entative not later than		1		
NOTE		/	BAC CH	TORREFIEL	
2. 3. 4. 5.	ALL ENTRIES MUST BE WRITTEN/TYPEWRITTEN DELIVERY PERIOD WITHIN THIRTY (30) CALENDAR DAYS WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUP YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PRO PRICE VALIDITY SHALL BE FOR A PERIOD OF	CURING ENTIT ENDAR DAYS UBMISSION OF	Y THE QUOTATION	ON BEING OFFERED	
Item No.	ITEM DESCRIPTION	QTY	UNIT	UNIT PRICE	
1	32amp 4-pronged Industrial Reefer (Socket Power Outlet) 440va assembly, Branded (see attached sample picture)	с, 8	Piece/s		
2	Rope, 3/4, 200m/roll	1	Roll		
3	Magnetic Contactor, 32A,440V/60Hz (see attached sample pictu	re) 3	Piece/s		
noted	After having carefully read and accepted your General Conditio above.	ns, I/We quote	you on the ite	m/s at prices	
			Printed Name/Signature		
		email:	Tel. No./Cellphone No.		
Canvassed by: OLIVER A. NADELA Date canvassed:					