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-7996-25

REQUEST FOR PRICE QUOTATION

NAME OF SUPPLIER _____ **RPQ NO.** 1201016-25
Office Address _____ Date Prepared 05/12/2025

Please quote your lowest price on the item/s listed below, subject to the General Condition on the last page, stating the shortest time of delivery and submit in a sealed envelope, your quotation duly signed by you/authorized representative not later than _____ .

DEOLITO B. TORREFIEL
BAC Chairperson

NOTE:

1. **ALL ENTRIES MUST BE WRITTEN/TYPEWRITTEN**
2. **DELIVERY PERIOD WITHIN THIRTY (30) CALENDAR DAYS**
3. **WARRANTY SHALL BE FOR A PERIOD OF SIX (6) MONTHS FOR SUPPLIES MATERIALS, ONE (1) YEAR FOR EQUIPMENT, FROM DATE OF ACCEPTANCE BY THE PROCURING ENTITY**
4. **PRICE VALIDITY SHALL BE FOR A PERIOD OF _____ CALENDAR DAYS**
5. **G-EPS REGISTRATION CERTIFICATE SHALL BE ATTACHED UPON SUBMISSION OF THE QUOTATION**
6. **BIDDERS SHALL SUBMIT ORIGINAL BROCHURES SHOWING CERTIFICATIONS OF THE PRODUCTS BEING OFFERED.**

Item No.	ITEM DESCRIPTION	QTY	UNIT	UNIT PRICE
1	Supply of mineral/distilled water (at 5 gallons per container and 50 containers per delivery) for PMO-SSG for the period from Jan. 1, 2026 to Dec. 31, 2026 to include provision of 30 units standard size hot and cold water dispenser (pls. attached TOR)	7800	Container	

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

_____
Printed Name/Signature

_____
Tel. No./Cellphone No.
email:

Canvassed by: **ROSAURO B. PALARAN**
Date canvassed: _____

_____
Date