



REQUEST FOR QUOTATION

NAME, ADDRESS & TEL/FAX NO. OF SUPPLIER

PLEASE QUOTE YOUR LOWEST PRICE, NET OF ANY POSSIBLE DISCOUNT:

WITH PRODUCT BROCHURE

DEADLINE FOR SUBMISSION(DATE/TIME)

August 29, 2017

CANVASS OPENING DATE/TIME

August 30, 2017 8:00 AM

DELIVERY REQUIREMENT WITHIN 7CD

CALENDAR DAYS FROM RECEIPT OF APPROVED NOTICE TO PROCEED

QUOTED BY:

REF. P.R. NO.: 2017-08-136

APPROVED BUDGET: P 9,750.00

PRINT AND SIGN NAME/POSITION

PURPOSE : For bills printing

ITEM NO	DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	TOTAL AMOUNT
	Water Bill	5	box		


TERMS AND CONDITIONS:

- 1) AS A GOVERNMENT AGENCY, TCWD SHALL DEAL ONLY WITH LEGITIMATE SUPPLIERS/ CONTRACTOR WHICH ISSUE BIR REGISTERED O.R.s;
- 2) QUOTED PRICES MUST BE INCLUSIVE OF 5% TAX FOR MATERIALS & SUPPLIES 6% FOR LABOR AND 1% EXPANDED WITHHOLDING TAX;
- 3) ALL QUOTATIONS SHALL BE FIRM AND VALID FOR A PERIOD OF AT LEAST THIRTY (30) DAYS FROM THE DATE OF RECEIPT OF QUOTATION & SHALL BE BINDING UPON THE SUPPLIER WITHIN THE PERIOD;
- 4) TCWD RESERVES THE RIGHT TO POST-QUALIFY ANY SUPPLIER AND/OR TO REJECT ANY OR SUBMITTED QUOTATIONS;
- 5) P.O./CONTRACT SHALL BE AWARDED TO THE LOWEST EVALUATED RESPONSIVE BID, DELIVERED ITEMS ARE SUBJECT TO INSPECTION. WITH PAYMENT PROCESSING TO COMMENCE ONLY AFTER ACCEPTANCE BY THE PROPERTY CONTROL DIVISION; AND
- 6) TERMS OF PAYMENT WITHIN 30 DAYS FROM DATE OF ACCEPTANCE.
- 7) Send your Quotation to toledocitywaterdistrict@gmail.com 467-8544 loc.124 / 467-9449

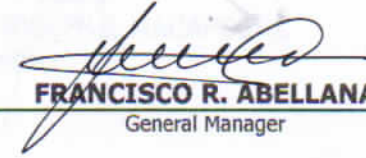
REQUESTED BY:


JENN GLAZA C. GALLEGO
 Indus. Rel. Mgmt. Officer B.

RECOMMENDING APPROVAL:


ARLENE V. MERCADER
 Division Manager, Administrative

APPROVED BY:


FRANCISCO R. ABELLANA
 General Manager



TOLEDO CITY WATER DISTRICT

Toledo City, Cebu
Tel. Nos. 467-8533/467-8544
TIN 221-482-713-000

WATER BILL

CONCESSIONER'S NAME & ADDRESS _____ MONTH _____

ACCOUNT NUMBER	METER NUMBER	CUBIC METER USED
PERIOD COVERED		
FROM	TO	
READINGS		
PREVIOUS	PRESERT	
NET BILL AMOUNT		

DATE _____ BILLING CLERK _____

No. _____ ORIGINAL COPY



TOLEDO CITY WATER DISTRICT

Toledo City, Cebu
Tel. Nos. 467-8533/467-8544
TIN 221-482-713-000

WATER BILL

CONCESSIONER'S NAME & ADDRESS _____ MONTH _____

ACCOUNT NUMBER	METER NUMBER	CUBIC METER USED
PERIOD COVERED		
FROM	TO	
READINGS		
PREVIOUS	PRESERT	
NET BILL AMOUNT		

DATE _____ BILLING CLERK _____

No. _____ CONSUMERS COPY

4.75 x 25