

REPUBLIC OF THE PHILIPPINES
MUNICIPALITY OF KAPALONG
Province of Davao del Norte

RFQ NO. 20241143
PR No. 100-24-11-1426
Date 11/28/2024
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Sir/Madam:

Requesting Office: **MDRRMO**

PURSUANT TO THE PERTINENT PROVISION OF REPUBLIC ACT NO. 9184 AND IT'S IMPLEMENTING RULES AND REGULATIONS, PLEASE QUOTE YOUR UNIT, TOTAL AND GRAND/LOT PRICE OF THE ITEMS LISTED HEREUNDER, WHICH THE MUNICIPALITY OF KAPALONG, DAVAO DEL NORTE DESIRES TO PURCHASE. SHOULD THE BIDS AND AWARDS COMMITTEE FIND YOUR PRICE REASONABLE, RESPONSIVE AND LOWEST IN THE MARKET, YOU WILL BE OFFICIALLY NOTIFIED AS TO THE DATE OF DELIVERY. IN CASE THERE IS A FAILURE OF DELIVERY AND/OR LATE DELIVERIES, LIQUIDATED DAMAGES SHALL BE IMPOSED AND BE CHARGED AGAINST YOUR PRESENT OR FUTURE TRANSACTIONS.

Item No.	Qty.	Unit	Description	ABC	Unit Price	Total Price	Remarks & Date of Delivery
1	18	set	(a.) Led Emergency Twin Head Light	4,500.00			
			Emergency Power: 2 x 3 watts				
			Luminous Flux: 2 x 300 lm				
			Color Temperature: 5,500- 6,500/ Daylight				
			Light Source: High Brightness COB led chips				
			Dimension: 297mm x 271mm x 92mm				
			Net Weight: 465 q				
			Body Material: Electro Galvanized Steel with Epoxy Powder				
			Body Color: White				
			Battery: Ni-Cd Battery				
			Battery Specification: 3.6V / 800mAh				
			Over-Discharge Protection				
			Battery Life: Up to 120 minutes				
			Test Button: Built in test Button				
			Input Voltage: AC 220 V- 265 V				
			Frequency Range: 50/60 Hz				
			Mounting: Wall Mounted				
			IP Rating: IP 30, Indoor				
			(b.)Including Installation of wirings Conduit works and Protection devices				
			TOTAL APPROVED BUDGET CONTRACT	81,000.00			

**SUPPLIERS MUST SPECIFY/INDICATE
BRAND NAMES UPON QUOTATION**

(SGD.) MARY ELIZABETH L.EXALA
BAC-Chairperson

I HEREBY CERTIFY:

- 1) THE ABOVE PRICES OF THE ITEMS HEREIN DESCRIBED ARE CURRENT AND VALID FOR 60 DAYS FROM DATE OF THE OPENING OF CANVASS.
- 2) IN CASE THE MUNICIPALITY OF KAPALONG, DAVAO DEL NORTE WILL OFFICIALLY NOTIFY THAT THE ITEMS WILL BE PRODUCED FROM MY/OUR ESTABLISHMENT, THE STOCKS ARE READILY AVAILABLE OFF THE SHELF.

NAME OF ESTABLISHMENT: _____

ADDRESS: _____

TEL. NO.: _____

SIGNATURE

PRINTED NAME

CANVASS BY: _____

Signature Over Printed Name

POSITION

