



Republic of the Philippines
MUNICIPALITY OF PASUQUIN
Ilocos Norte

REQUEST FOR QUOTATION

Date: 09.09.2026

Quotation NO. 2026.115

PR No: 2026.08.287

Please quote your lowest price on the item/s listed below, subject to the General Conditions on the last page, stating the shortest time of delivery and submit your quotation duly signed by your representative not later than September 15, 2026 @ 8:30AM in the return envelope attached herewith.

PATRICK JOHN T. RATUITA, MAPA

BAC Chairman

- NOTE: 1. All entries must be type written
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 one (1) month upon submission of the quotation
5. The following documents shall be attached upon submission of the quotation:
a. Mayor's / Business Permit
b. Certificate of Registration
c. PhilGEPS registration certificate/number
d. Omnibus Sworn Statement
e. Brochure
6. Approved Budget of the Contract P 200,000.00

ITEM NO.	ITEM & DESCRIPTION	Brand/Model	QTY.	UNIT	UNIT PRICE	TOTAL COST
1	Floor Standing Aircon		1	unit		
	-rated cooling capacity (BTU/h): 35145					
	-rated cooling capacity (kw): 10.30					
	-rated power input/power consumption (kw): 3.75					
	-rated current: (amp): 16.5					
	-power supply: (v/Ph/Hz): 230V/1/60Hz					
	-airflow volume (m3/h)					
	-refrigerant charge (kg): 2300					
	-pipe size (inches) 5/8 x 3/8					
	-maximum pipe line distance 99ft (30m)					
	-indoor unit (W*D*H)mm: 580*400*1925					
	-outdoor unit (W*D*H)mm: 970*395*805					
	-indoor unit (kg) 52					
	-outdoor unit (kg) 65					
	-color white					
	-with instalattion					
	-10 years compressor warranty					
	-5 years spareparts warranty					

Brand and Model :

Delivery Period :

Warranty :

Price Validity :

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

supply & delivery of 1 unit floor standing aircon at assessor office
2026.09.229

Printed Name/Signature

Tel. No./Cellphone No./Email Add.