



REQUEST FOR QUOTATION (RFQ)

SUPPLY, DELIVERY AND INSTALLATION OF DBP SIGNAGE

Area of Delivery	: DBP Basilan Branch - Isabela City, Basilan Province: New Government Procurement Act (RA No. 12009)		
Trade Agreement			
Procurement Mode	: Small Value Procurement (SVP)		
Classification	: Goods and Services		
Project/Category	: Supply, Delivery and Installation of DBP Signage (horizontal)		
Approved Budget	: ₱ 146,030.89		
Delivery Period	: Thirty (30) calendar days from receipt of Job/Purchase/Notice to Proceed		
Company Name			
Address	· 		
F-mail Address	·		

U	INIT	ITEM / DESCRIPTION	QUOTATION
			(Inclusive of VAT/applicable taxes, delivery installation, testing and commissioning)
1	lot	Supply, Delivery and Installation of DBP SIGNAGE. (horizontal)	
		(Refer to attached Technical Specs/Terms of Ref.)	

Please quote your lowest price by filling out table above on the subject project/category for the Development Bank of the Philippines (DBP), Basilan Branch, BBG-Western Mindanao.

Please **submit this form** duly signed by your representative to the undersigned at DBP Basilan Branch, Isabela City, Basilan or DBP BBG-Western Mindanao, Don P. Lorenzo St., Port Area, Zamboanga City or email to efsorilla@dbp.ph not later than 3:00 p.m. on November 19, 2025 together with the following:

- 1. Certified true copy of valid/current Business Permit
- 2. Certified true copy of valid/current Registration Certificate from Department of Trade & Industry (DTI) for sole proprietorship or Securities and Exchange Commission (SEC) for partnership/corporation(whichever is applicable).
- 3. PhilGeps Registration Certificate
- 4. BIR Certificate of Registration
- 5. Duly signed Data Privacy Consent Form (attached), with photocopy of valid ID of owner/rep.
- 6. Duly Conformed Scope of Works/Technical Specifications and Drawings (attached).
- 7. Filled-out Bill of Quantities (review to have no blank item) duly signed by bidder (excel file attached).

MGR. EMILY F. SORILLA
CHAIRPERSON, RBAC-WM
Contact No. 09175079402
November 13, 2025

Tel. No./Fax No.

Received/Submitted by:
(Signature over printed Name of Authorized Representative)
DATE Submitted: