

845



Professional Regulation Commission

CANVASS FORM

CF #: 2017-019

Date: February 7, 2017

SIR / MADAM:

May we invite your company to quote for the lowest price/s, VAT included, on the items/s listed and described hereunder.

Please submit your QUOTATION to the Bids and Awards Committee (BAC), through BAC Secretary Mr. Romel B. Ruiz, located at the 3rd floor, BAC/QMS Office, PRC Annex Building, P. Paredes St., Sampaloc, Manila in duplicate copies placed in a sealed envelope or through Tel. Fax at (02) 310-00-37, which shall be stamped thereon the date and time received and shall place the same in the "Bids Box" by the BAC Secretariat.

The quotation received through fax or sealed envelope must be received by the BAC Secretariat not later than three (3) days from receipt hereof and not beyond 3:00 o' clock in the afternoon of the last day to submit the quoted price. All bids which are higher than the ABC shall be automatically disqualified.

The BAC reserves the rights to reject any and all bid/s submitted which is/are not in accordance with the specification and those submitted after the deadline. Provided, the supplier shall reimburse PRC in case of over pricing.

Very truly yours,

Served by:

ARISTOGERSON T. GESMUNDO
Chairman, Bids & Awards Committee
ARISTOGERSON T. GESMUNDO
2/7/17

Canvasser

Date: _____

Quantity	Unit	Item (with specification)	Unit Cost
1	lot	Supply of Labor, materials and allied technical supervision for the replacement of Compressor for One (1) 5.0 TR Capacity, Floor Mounted Type, Koppel Brand with the following Scope of Work:	Php 52,000.00
		1. Dismantling of defective Compressor	
		2. Flushing the system using Refrigerant R-141B with Inert Gas	
		3. Install Brand New Compressor 5.0 TR Capacity Copeland Scroll Type	
		4. Replace Filter Drier with new one	
		5. Pressurize the System using Nitrogen Gas for Leak Testing	
		6. Repair of Leakage found	
		7. Internal Dehydration (Vacuuming)	
		8. Check and Calibrate Electric Control	
		9. Recharging of Refrigerant R-22	
		10. General Cleaning	
		11. Test Run and Observation	
		nothing follows	
		Note: Mode of payment: bank to bank	
		VAT INCLUSIVE	

Received by:

(Name & Signature of Proprietor/ Authorized Representative)
Telephone/ Fax no. _____

IMPORTANT:

Please fill up all required data and submit a photocopy of your Valid Business Permit and PhilGeps Certificate of Registration.

by:
AViray
2-9-17
1:39