



NTP
 3-27

B.O. CONTROL # 249

PURCHASE ORDER

Procuring Department: **Governor's Office**

Supplier : **BT INDUSTRIES INC.** P.O.: **1 0 0 2 0 0 3** **No. 0096**

Address : **118 Kanlaon St., Sta. Mesa Heights, Quezon City**

E-mail Address : _____ Date : **March 23, 2020**

Telephone No. : _____ Mode of Procurement : **Negotiated/Emergency**

TIN : _____

Gentlemen:
 Please furnish this office the following articles subject to the terms and conditions contained herein:

Place of Delivery: **PGO** Delivery Term: **w/ in 7 calendar days upon receipt of NTP**

Payment Term : **charge**

Item No.	UNIT	DESCRIPTION	QTY.	UNIT COST	AMOUNT
1	units	Commuter Ambulance Specifications: Fuel Type - diesel ✓ No. of Cylinders - 4 ✓ Engine size/displacement - 2,488 ✓ Maximum power (PS) - 129 ✓ Maximum Torque (NM) - 356 ✓ Engine Type - Inline 4 Cylinder, DOHC, 16 valves, ✓ Variable turbocharger (VGS) ✓ Transmission Type - 5 speed Manual ✓ Fuel Capacity (Litres) - 65 ✓ Overall length (mm) - 5,080 ✓ Overall width (mm) - 1,695 ✓ Overall height (mm) - 2,285 ✓ Wheelbase (mm) - 2,940 ✓ Inclusions: *Dismount all van rear passenger seat assembly and re-install one original seat w/ backseat at right side body to serve as doctor, nurse and aide seat ✓ *Install 1/2 thick plywood and cover floor w/ rubber vinyl matting. ✓	2	2,500,000.00	5,000,000.00
<i>continuation at the next page...</i>					

TOTAL AMOUNT IN WORD): five million pesos only

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one (1) percent for everyday of delay shall be imposed.

Very truly yours

HUMERALITO A. DOLOR MPA, PhD.
 Provincial Governor

Conforme:

GENIE ALLI
 Signature Over Printed Name of Supplier
 Date **03-25-2020**

Funds Available:

ALTHEA F. AGUTAYA
 Provincial Accountant

OBLIGATION REQUEST NO: _____
 AMOUNT : _____