

on: T.a.R.S.I.E.R 117

Item No.	Quantity	Units of Issue	Item Description	Estimated Unit Cost	Estimated Cost
1	2	set	Vehicle Specificatios: (AMBULANCE) Overall Dimensions:(mm) 5,265x1,950x1,990 Wheelbase:(mm) 3,210 Engine Type: 4 Cylinders in-line Type: 16 Valve DOHC Engine Displacement:(cc) 2,755 Maximum Output:(ps/rpm) 176 ps/3,400 rpm Maximum Torque:(N-m/rpm)420Nm/1,400-2,600 rpm Fuel Capacity:(L) 70 Total System Max Output:(w/Motor Generator) Power Transmission: 6-speed Manual Front Brake/Rear Brake Ventilated Discs/ Drums Tires: 215/70 R16C Wheels Size: 7x16' Steel w/ Full Cap Ambulance Kit: Basic Top Light w/ Siren & PA System - TBD4126 Red/Blue Construct Medical Floor Mounted Cabinet (30'x9'x24') 2 layers Install fully collapsable stretcher w/ locking mechanism Oxygen tank w/ content 20 lbs. Wall mounted BP Apparatus First Aid Kit Flashlight LED w/ Battery Stethoscope Oxygen tank Regulator AmbuBag Combination Adult & Pedia Minor Surgical Kita Fire Extinguisher 10 lbs. Automated External Defibrillator I.V Hook w/ strap Single Oxygen Tank Holder Vinyl Sticker (4 side Ambulance name w/ TaRSIER 117 Logo) Steel Flooring Non-Slip Matting Stainless Bumper Approach Stainless Ramp Approach Tint (Black) 1.2-Seater w/ Storage w. Seatbelt and Backrest 1.3-Seater w/ Storage, Seatbelt & Backrest Fiber Glass Partition between Driver and Patient Area Wheelchair with Holder Suction Machine Spine Board Overhead grab Rail on the ceiling on top of stretcher LTO Registration Free 3 years. GSIS insurance. tint and tools	3,000,000.00	6,000,000.00
TOTAL					6,000,000.00

PP# 21-0548
 JR/P.R.# _____ REC'D _____
 PROVINCE OF DAVAO _____
 LGU _____
 MOU _____
 X-2021-0265
 P.G.M., M.N.

PROVINCIAL BUDGET OFFICE
 PROVINCE OF DAVAO
 CONTROL NO. _____
 BENCHMARK NO. _____
 EXPENSE CODE _____
 FUND SOURCE _____
 PETER M. S. _____

Place of Delivery: TaRSIER 117 HQ, Camp Bernido Cmpd.

J.A. Clarin St., Dao Dist. Tagbilaran City

Date of Delivery: 150 Days upon receipt of NTP

Purpose : Emergency Medical Response Vehicle for TaRSIER 117

Requested by:	Cash Availability:	Approved by:
Signature: _____	_____	ATTY. ARTHUR C. YAP
Printed name: ANTHONY R. DAMALERIO	EUSTAQUIO A. SOCORIN	By Authority of the Governor
Designation: Head, PDRRM	Provincial Treasurer	ATTY. KATRYNCE D. PICQUINTO Provincial Administrator