

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MIMAROPA Region 1680 F.T. Benitez corner Malvar Sts., Malate, Manila

## REQUEST FOR QUOTATION

		RFQ Date:	No. 2021-05-0366 NP-SVP MAY 06, 2021
Company Name			
Company Address	-		
Contact Person		THE STREET	
Contact No.			
Email Address			
Company TIN			
PhilGEPS Reg. No.			
Sir/Madam:			
for the goods listed in A	nment price/s including delivery ch nnex A. Failure to indicate inform atalogues, literatures and/or sample	ation could be basis for no	reable taxes, and other incidental expenses n - compliance. Also, furnish us with
If you are exclusive man quotation a duly notarize	ufacturer, distributor, or agent in the ded certification to this effect.	he Philippines for goods lis	ted in Annex A, please attach in your
ncome/Business Tax R	ch copies of your Company's Busi Return and Omnibus Sworn State usiness Permit and PHILGEPS Reg	ement. The Certificate of	rmit, PhilGEPS Certificate, latest Platinum Membership maybe submitted
Please accomplish and a	observation Community and the second		
lease accomplish and st	abmit this form together with Anne	ex A to DSWD - Procureme	ent Unit at 2nd Floor 1680 F.T. Benitez
corner Malvar Sts., Mala	ite, Manila or fax it through num	bers: (02) 5336-8106 to 0'	7 loc. 24051-52 or email to:
glicop@dswd.gov.p	h not later than 5:00 PM on MA	Y 13, 2021.	
			Administrative Officer V Procurement Section
Terms and Conditions:		,	
Award shall be made     Price Validity shall b     Services shall be deli     Place of Delivery.	oe valid until: One Hundred Twenty ivered on: MAY 30, 2021		lot basis Z ST., COR. MALVAR ST., MALATE, MANILA)
5. Terms of Payment:	within 15-30 days upon final ins	spection and acceptance	Z ST., COR. MALVAR ST., MALATE, MANILA)
Payment through LD	DDAP-ADA (List of Due and Deman	dable Accounts Payable, Ad	vige to Debit Assesset)
Account Name:		Account Num	
Bank Name:		Branch:	oer :
**Note: Non Land E	Bank of the Philippines accounts sha	Il he charged a service fee	
6. Liquidated Damages	Penalty: In case of failure to	make full delivery within the	a time specified above
	quidated damages shall be at least e	anal to one tenth of an a see	time specified above,
the unperformed po	rtion for every day of delay shall be	imposed Ones the same let	cent (0.001) of the cost of
damages reaches ter	n percent (10%) of the amount of co	ntuget the Description Facility	ive amount of liquidated
the contract without	t prejudice to other sources of action	itract, the Procuring Entity	may rescind or terminate
7. For goods please indi	t prejudice to other courses of action icate brand, model and country of orig	i and remedies available und	der the circumstances.
8. In case of discrepance	y between unit cost and total cost, uni	t coet chall proved	
Please indicate warra	inty	cost shall prevail.	
	tive supplier must be registered at the F	Drilliants Community	
(PhilGEP	S). You may visit the PhilGEPS websit	e at www. philgeps.gov.ph to re	nic Procurement System egister"
LORETTA	G. LICOP		
Procureme	eut Officer		Cignotius Ocean Pair 131
Telefax: 5336-8106	to 07 loc. 24051-52		Signature Over Printed Name

( Supplier)



## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MIMAROPA Region 1680 F.T. Benitez corner Malvar Sts., Malate, Manila Note: "Prospective supplier must be registered at the Philippine Government Electronic Procurement RFQ No 2021-05-0366 System (PhilGEPS). You may vist the PhilGEPS website at www.philgeps.gov.ph to register" Date: Company Name NP-SVP Company Address Contact Person Contact No. **Email Address** Company TIN PhilGEPS Reg. No. Item Qty. Unit Purchaser's Spcification **Bidder's Specifications Unit Cost Total Cost** No. **OFFICE SUPPLIES** 1 100 PIECE CORRECTION TAPE, INDIVIDUAL PACK 2 20 CANON PIXMA IX 6770 INK, PGI-35 BLACK, CLI-36 COLOR SET 3 10 CALCULATOR 4 10 PIECE STAPLE REMOVER, PLIER TYPE \*\*\*\*\*nothing follows\*\*\*\*\* **Delivery Place:** DSWD Field Office MIMAROPA Region 1680 F.T. Benitez St., cor. Malvar St., Malate **Delivery Date:** MAY 30, 2021 Approved Budget for the Contract: Php 56,650.00 Note: Please specify brand/ model/ origin Please fill up the space for Bidder's Specification "Failure to indicate information could be basis for non-compliance." PURPOSE UCT OFFICE SUPPLIES FOR NOTIFICATION, REGISTRATION AND PAYOUT ACTIVITIES 2021-05-0366 IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWD FO MIMAROPA Region, Procurement Unit within three (3) days from the date advance copy was served thru fax. FAILURE to show up and sign the original P.O. means the bidder is not interested and will be ground for suspension or blacklisting in DSWD's future biddings. VAT LORETITA & LICOP Non-VAT Procurement Officer (Signature over printed name) Telefax: 5336-8106 to 07 loc. 24052 Supplier