

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

1680 F.T. Benitez corner Malvar Sts., Malate, Manila

REQUEST FOR QUOTATION

		RFQ No.: 2021-07-0686-NP-SVP
		Date: July 27, 2021
Company Name		
Company Address		
Contact Person		
Contact No.	:	
Email Address	:	
Company TIN	:	
PhilGEPS Reg. No.	:	<u></u>
Sir/Madam:		
expenses for the goo	ods listed in Annex A. Failure to	very charges, VAT or other applicable taxes , and other incidental o indicate information could be basis for non - compliance. Also, eratures and/or samples, if applicable.
If you are exclusive n	nanufacturer, distributor, or age	nt in the Philippines for goods listed in Annex A, please attach in
your quotation a duly	y notarized certification to this e	ffect.
A district and the control of		D D 1 M I. D 14 DLUGERO C. 415-44 Istant
Income/Business T	ax Return and Omnibus Swor	's Business Permit, Mayor's Permit , PhilGEPS Certificate, latest on Statement. The Certificate of Platinum Membership maybe d PHILGEPS Registration Number
Please accomplish a	nd submit this form together wit	th Annex A to DSWD - Procurement Unit at 2nd Floor 1680 F.T.
		through numbers: (02) 5336-8106 to 07 loc. 24052 or email to:
		tcorcoro@dswd.gov.ph not later than 5:00 PM on August 3,
2021 (Tuesday).	· · · · · · · · · · · · · · · · · · ·	
		HARVY E. CALABIO Administrative Officer V Procurement Section
Terms and Condition	ons:	
		Пин
Award shall be n		x total quoted price lot basis
	all be valid until: One Hundred Tv	
		pon receipt of approved Purcase Order (PO)
Place of Delivery		OPA (1680 F.T. Benitez cor., Malvar Sts., Malate, Manila
5. Terms of Payme		al inspection and acceptance
- [1] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12] 12 [12]		Demandable Accounts Payable- Advice to Debit Account)
Account Name:	*	Account Number :
Bank Name:		Branch:
	경사님 [1] 이 경기 가입니다. 그렇게 되는 그 그 사람들이 되었다. 그 그 그 그 없는데 그 없는데 그 없다.	unts shall be charged a service fee
Liquidated Dama		ure to make full delivery within the time specified above,
		at least equal to one-tenth of one percent (0.001) of the cost of
		shall be imposed. Once the cumulative amount of liquidated
		unt of contract, the Procuring Entity may rescind or terminate
		of action and remedies available under the circumstances.
	e indicate brand, model and count	ASTON 1980 1 DE MENNE 1 AV
	pancy between unit cost and total	cost, unit cost shall prevail.
9. Please indicate		10 Phillips - 0
		at the Philippine Government Electronic Procurement System
(PhilG	EPS). You may visit the PhilGEPS w	vebsite at www. philgeps.gov.ph to register"
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16	_/.	
	T. CORCORO	
	rement Officer	Signature Over Printed Name
Telefax: 5336-8106	to 07 loc. 24052	(Supplier)

Email: proc.davecorcoro.dswd4b@gmail.com/ dtcorcoro@dswd.gov.ph



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MiMaRoPa Region

	n (PhilGE	PS). You may vist the PhilGEPS website at www.philgeps.gov.ph to registe	" Date:	(should be filled up by suppliers)	
mpany Na	ame	1	MOP: NP- SVP	by suppliers)	
Company Address		1			
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ail Addre	ess				
mpany TI	IN	:			
IGEPS R	eg. No.	:			
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M Qty.	Unit		Bidder's Specifications	Unit Cost	Total Cost
20	piece	PALLET			
		Specifications:			
_		> Material: Plastic			
+	-	> Entry Type: 4-way > Style: Single Face		-	
	-	> Dimension: 1200 x 1000 x 150mm			
		> Weight: 20.5 kg			M1
		> Dynamic Load: 2T			
		> Static Load: 6T			
		> Color: Standard Blue			
+		>>>> Nothing Follows <<<<			
				+	
+	1	Date of Delivery: Seven (7) days upon receipt of approved Purchase			
		Order (PO)			VIII I
		Area of Delivery: DSWD Field Office MIMAROPA (1680 F.T. Benitez			
		cor., Malvar Sts., Malate, Manila)			
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-			"Pailure to indicate information could be		
+	1	PAGE 1 OF 1	basis for non-compliance."		
1		Total Approved Budget for the Contract: Php120,000.00			
noor	Facility 1		1		
RPOSE:	For the	Purchase of Plastic Pallet to be used for stacking files.			
No.: PORTANT	: The wins	0686-NP-SVP ning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWI	FO MIMAROPA Region, Procurement Un	t within three (3) da	ys from the date
ance cop	y was ser	ved thru fax. FAILURE to show up and sign the original P.O. means the bio	der is not interested and will be ground fo	r suspension or bla	cklisting in DSW
ure biddin	igs.				
					VAT
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