

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

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

## REQUEST FOR QUOTATION

	RFQ No. 2021-09-0817
	Date: September 20, 2021
Company Name	
Company Address	
Contact Person	V. Comment of the com
Contact No.	÷
Email Address	-
Company TIN	
PhilGEPS Reg. No.	
moe. o mag. mo.	
Sir/Madam:	
expenses for the goo	overnment price/s including delivery charges, VAT or <b>other applicable taxes</b> , and other incidental ds listed in <b>Annex A</b> . Failure to indicate information could be basis for non - compliance. Also, ptive brochures, catalogues, literatures and/or samples, if applicable.
	manufacturer, distributor, or agent in the Philippines for goods listed in Annex A, please attach in your arized certification to this effect.
Certificate of Platin	attach copies of your Company's Business Permit, Mayor's Permit and PhilGEPS Certificate. The um Membership maybe submitted in lieu of the Mayor's /Business Permit and PHILGEPS.  Omnibus Sworn Statement and latest ITR may be submitted as requirement for payment.
Please accomplish a	nd submit this form together with Annex A to DSWD - Procurement Unit at 2nd Floor 1680 F.T.
	ir Sts., Malate, Manila or fax it through numbers: (02) 5336-8106 to 07 loc. 111 or email to:
	imaropa@dswd.gov.ph not later than 5:00 PM on September 24, 2021 (Friday).
	Very truly yours.  HARVY & CALABIO  Administrative Officer V
	Procurement Section
Terms and Condition	ons:
Award shall be m	
2. Price Validity sha	delivered on: October 2021- December 2021
Services shall be     Place of Delivery	
Flace of Delivery     Terms of Paymer	
Account Name:	LDDAP-ADA (List of Due and Demandable Accounts Payable- Advice to Debit Account)
Bank Name:	Account Number :
	d Bank of the Philippines accounts shall be charged a service fee
	ges/Penalty: In case of failure to make full delivery within the time specified above,
many the first property of the same first and the same first	ne liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of
	d portion for every day of delay shall be imposed. Once the cumulative amount of liquidated
	es ten percent (10%) of the amount of contract, the Procuring Entity may rescind or terminate
	hout prejudice to other courses of action and remedies available under the circumstances.
	indicate brand, model and country of origin.
	pancy between unit cost and total cost, unit cost shall prevail.
Please indicate w	
10. NOTE: "Prosp	pective supplier must be registered at the Philippine Government Electronic Procurement System EPS). You may visit the PhiliGEPS website at www. philippine gov.ph to register*
(rillG)	LEGI, 100 may visit the rinioers website at www. pinigeps.gov.ph to register

Telefax: 5336-8106 to 07 loc. 24052 Contact Number: 09984746898 Signature Over Printed Name (Supplier)



Company Name Company Address Contact Person Contact No. Email Address Company TIN PhilGEPS Reg. No.

PURPOSE:

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MiMaRoPa Region

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

	RFQ No. 2021-08-0724 Date:
	MOP: NP-SVP

No.	45.55	Unit		Bidder's Specifications	Unit Cost	<b>Total Cost</b>
			SERVICE PROVIDER FOR THE APPLICATION AND INSTALLATION OF TRUNK LINES FOR DSWD MIMAROPA REGIONAL OFFICE USE	-		
	-		TRONK LINES FOR DSWID MINIAROPA REGIONAL OFFICE USE			
1 1	1	Lot	Additional Trunklines			
			Quantity : 5 trunklines			
			Service Provider shall provide monthly landline services			
			Shall provide a fixed monthly statement of account (SOA)			
			With local and oustside direct calls			
			Contract Duration : 3 mos for 2021 , to be renewed for 2022 ( 1 year_)			
			Inclusion:			
			Installation and supplies and materials			
			Approved Budget for the Contract : Php 150,000.00			
			Approved Budget for the Contract : Prip 150,000.00			
	-					
						3
	-+					
-				"Failure to indicate		
				information could be basis for non-compliance."		

PR No.:	2021-09-0817			
				VAT
		(Signa	ture over printed name)	Non-VAT

For additional trunklines of DSWD MIMAROPA Regional Office

Supplier

IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWD FO MIMAROPA Region, Procurement Section within three (3) days from the date advance copy was served thru email. 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.