

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

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

REQUEST FOR QUOTATION

		RFQ No. 2021-10-0910 NP-SVP
		Date: October 18, 2021
Company Name	3	
Company Address	4	
Contact Person	}	
	1	
Contact No.	<u> </u>	
Email Address	3	
Company TIN	<u>:</u>	 .
PhilGEPS Reg. No.	<u> </u>	
Sir/Madam:		
expenses for the goo	vernment price/s including deliver ds listed in Annex A . Failure to in ochures, catalogues, literatures ar	y charges, VAT or other applicable taxes , and other incidental dicate information could be basis for non - compliance. Also, furnish ad/or samples, if applicable.
	nanufacturer, distributor, or agent i arized certification to this effect.	n the Philippines for goods listed in Annex A, please attach in your
Income/Business Ta	ttach copies of your Company's E ax Return and Omnibus Sworn S ie Mayor's /Business Permit and P	Business Permit, Mayor's Permit , PhilGEPS Certificate, latest Statement. The Certificate of Platinum Membership maybe HILGEPS Registration Number
Please accomplish a	nd submit this form together with A	nnex A to DSWD - Procurement Unit at 2nd Floor 1680 F.T. Benitez
corner Malvar Sts., N	falate. Manila or fax it through ne	umbers: (02) 5336-8106 to 07 loc. 111 or email to:
		later than 5:00 PM on October 25, 2021 (Monday).
procurement.ion	miaropa@uswu.gov.pm	later than 5:00 FW on October 23, 2021 (Monday).
		(Van ta) Villand
		/ Verv truly vours.
		HARVY BY SALABIO
		Procurement Section
F-10 57/50 55/69		
Terms and Condition	ns:	
1. Award shall be n	nade on per: Titem basis	x total quoted price lot basis
	all be valid until: One Hundred Twee	
3. Convious shall be	e delivered on: 15 Calendar days up	on issuance of Purchase Order
Place of Delivery		
The state of the s		
5. Terms of Payme		Inspection and acceptance
N 51 (A 196)	1 12	nandable Accounts Payable- Advice to Debit Account)
Account Name:		Account Number :
Bank Name:		Branch:
**Note: Non Lai	nd Bank of the Philippines account	
Liquidated Dama		to make full delivery within the time specified above,
the amount of t	he liquidated damages shall be at	east equal to one-tenth of one percent (0.001) of the cost of
the unperforme	d portion for every day of delay sh	all be imposed. Once the cumulative amount of liquidated
damages reach	es ten percent (10%) of the amoun	t of contract, the Procuring Entity may rescind or terminate
		action and remedies available under the circumstances.
	e indicate brand, model and country	
	epancy between unit cost and total co	
		st, drift cost shall provail.
9. Please indicate		the Phillippine Government Flactronic Procurement System
		the Philippine Government Electronic Procurement System bsite at www. philgeps.gov.ph to register"
Telefax: 5336-810	06 to 07 loc. 24052	Signature Over Printed Name
Contact Number		(Supplier)

Procurement Form No. 04-A (Annex A)

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

ompa ontac ontac mail / ompa	any Name any Addr et Persor et No. Address any TIN EPS Reg.	ress	:	Date: (should be fill by suppliers) MOP: NP-SVP		
em lo.	Qty.	Unit	Item Description	Bidder's Specifications	Unit Cost	Total Cost
			Supply and Delivery of Heavy Duty Scanner	11		
1	1	Unit	Heavy Duty Scanner			
			Scanner Type : Sheetfed		-	
			Scanning Sensor Unit : CIS			
			Scanning Side : Simplex , Duplex , Skip Blank Pages			
			Output : Color , Black and White			
			Optical Resolution : ≥ 600 dpi			
			Light Source : RGB			
			Interface ; USB , Wired LAN			
_			Daily Duty Cycle : ≥ 11,000 sheets	-		_
-		_	Paper Dimension : 210 mm x 594 mm Feeder ; ≥ 500 sheets			
-						
			Features: Barcode Recognition, 2D Code, Patch Code, Ultrasonic Double -Feef Detection, Stapel Detection			
	1000000		Software : ISIS Drive, TWAIN Driver			
			Warranty: 1 year hardware warranty	X		
-			APPROVED BUDGET FOR THE CONTRACT: 120,000.00	4		
-			APPROVED BUDGET FOR THE CONTRACT: 120,000.00			
-		-				
_						
-						
-		-				
-		-				
				Please indicate brand and country of origin		
				"Failure to indicate information could be basis for non-compliance."		
URF	POSE:		ly and Delivery of Heavy Duty Scanner 10-0910			

(Signature over printed name) Supplier IMPORTANT: The winning bidder MUST SIGN the 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 sign the original P.O. means the bidder is not interested and will be ground for suspension or blacklisting in DSWD's future biddings.