



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT  
FIELD OFFICE - MIMAROPA

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

REQUEST FOR QUOTATION

RFQ No. 2021-10-0121  
Date: November 9, 2021

Company Name : \_\_\_\_\_  
Company Address : \_\_\_\_\_  
Contact Person : \_\_\_\_\_  
Contact No. : \_\_\_\_\_  
Company TIN : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
PhilGEPS Reg. No. : \_\_\_\_\_

Sir/Madam:

Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be basis for non-compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable.

If you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A, please attach in your quotation a duly notarized certification to this effect.

Additionally, please attach copies of your Company's Business Permit, PhilGEPS Certificate, latest Income/Business Tax Return and Omnibus Sworn Statement. The Certificate of Platinum Membership maybe submitted in lieu of the Mayor's /Business Permit and PHILGEPS Registration Number

Please accomplish and submit this form together with Annex A to DSWD - Procurement Unit at 2nd Floor 1680 F.T. Benitez corner Malvar Sts., Malate, Manila or fax it through numbers: (02) 5336-8106 to 07 loc. 24051-52 or email to: kc4bprocurement2@gmail.com not later than 5:00PM on November 17, 2021(Wednesday)

Very truly yours,

**HARVIN B. CALABIO**  
Administrative Officer V  
Procurement Section

Telefax: 5336-8106 to 07 loc. 24051-52

Terms and Conditions:

- Award shall be made on per:  item basis  total quoted price  lot basis
- Price Validity shall be valid until: One Hundred Twenty (120) Calendar days
- Services shall be delivered on: December 6-8, 2021
- Place of Delivery: Gloria Oriental, Mindoro
- Terms of Payment: within 15-30 days upon final inspection and acceptance  
Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable- Advice to Debit Account)  
Account Name: \_\_\_\_\_ Account Number : \_\_\_\_\_  
Bank Name: \_\_\_\_\_ Branch: \_\_\_\_\_  
**\*\*Note: Non Land Bank of the Philippines accounts shall be charged a service fee**
- Liquidated Damages/Penalty: In case of failure to make full delivery within the time sepcified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay shall be imposed. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of contract, the Procuring Entity may rescind or terminate the contract without prejudice to other courses of action and remedies available under the circumstances.
- For goods please indicate brand, model and country of origin.
- In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- Please indicate warranty: \_\_\_\_\_
- NOTE: "Prospective supplier must be registered at the Philippine Government Electronic Procurement System PhilGEPS. You may visit the PhilGEPS website at [www.philgeps.gov.ph](http://www.philgeps.gov.ph) to register"

**SHARON F. PASCASIO**  
Procurement Officer

Tel. No: 5336-8106 Local 24051-52

Signature Over Printed Name  
( 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**

**Note: "Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph to register"**

**RFQ No.** 2021-10-0121  
**Date:** (should be filled up by suppliers)  
**MOP:** SHOPPING

**Company Name :** \_\_\_\_\_  
**Company Address :** \_\_\_\_\_  
**Contact Person :** \_\_\_\_\_  
**Contact No. :** \_\_\_\_\_  
**Company TIN :** \_\_\_\_\_  
**Email Address :** \_\_\_\_\_  
**PhilGEPS Reg. No. :** \_\_\_\_\_

Item No.	Qty.	Unit	Purchaser's Specifications	Bidder's Specifications	Unit Cost	Total Cost
1	22	pax	Board and Lodging for 3 days Meals: AM Snack, Lunch, PM Snack and Dinner Plated: AM and PM Snacks (with cold beverage) Managed Buffet: Lunch and Dinner (Minimum of 2 viands with soup, dessert/fruits and cold drinks. No repetition of meals)  Title of the Activity: Technical Working Group Session and Checkpoint (Cluster 2: Bansud, San Teodoro, Mansalay and Bulalacao, Oriental Mindoro) Venue: Gloria, Oriental Mindoro Preferred Location: Hotel within the vicinity or near the venue of the activity Date of Activity: December 6-8, 2021 Guaranteed Pax: 22 Check In Date and Time: December 6, 2021 Monday, 2:00 pm Check Out Date and Time: December 8, 2021 Friday, 12: 00 nn Room Sharing: Triple Sharing Airconditioned Room with individual bed per pax and free toiletries Meal Schedule: December 6, 2021 : PM Snacks and Dinner December 7, 2021 : Breakfast, AM Snacks, Lunch, PM Snacks and Dinner December 8, 2021 : Breakfast and AM Snacks Food Service Style / Type: Managed Buffet for Breakfast, Lunch and Dinner; and Plated for AM and PM Snacks  Menu Selection: Hotel to submit menu  Inclusion: 1. Free use of Airconditioned Conference Room (can accommodate more than 20 pax and free from noise that is detrimental to the event) 2. No obstructing pillars in the conference room 3. Availability of electric outlets and free use of extension cords 4. With audio system and at least 2 microphones 5. Free use of projector and whiteboards 6. Free use of reliable and uninterruptible wifi connections 7. Free flowing coffee and drinking water  ***Page 1 of 2***			

**PURPOSE: Board and Lodging for the Technical Working Group Session and Checkpoints of Cluster 2, GLORIA, ORIENTAL MINDORO**

PR No.: **2021-10-0121**

**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 form 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.**

**SHARON F. PASCASIO**  
 Procurement Officer

Tel: 5336-8106/Local 24051-52/Fax No: 5336-8106 Local 24051-52 /Email: kc4bprocurement2@gmail.com

(Signature over printed name)  
 Supplier

<input type="checkbox"/>	VAT
<input type="checkbox"/>	Non-VAT





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

Note: "Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph to register"

RFQ No. 2021-10-0121
Date: (should be filled up by suppliers)
MOP: SHOPPING

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

Table with 6 columns: Item No., Qty., Unit, Purchaser's Specifications, Bidder's Specifications, Unit Cost, Total Cost. Contains detailed specifications for food, parking, and building requirements, along with a budget cost of Php 132,000.00.

PURPOSE: Board and Lodging for the Technical Working Group Session and Checkpoints of Cluster 2, GLORIA, ORIENTAL MINDORO
PR No.: 2021-10-0121

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 form 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.

SHARON F. PASCASIO
Procurement Officer
Tel: 5336-8106 Local 24051-52/Fax No: 5336-8106 Local 24051-52 /Email: kc4bprocurement2@gmail.com

(Signature over printed name)
Supplier

VAT
Non-VAT

**REQUEST FOR QUOTATION RECEIVING FORM**

I Hereby certify that I \_\_\_\_\_, of \_\_\_\_\_ has received the **Request for**

**Quotation RFQ No. 2021-10-0121** from DSWD MIMAROPA Region intended for **Board and Lodging for the Technical Working Group Session and Checkpoints for Cluster 2 (Bansud, San Teodoro, Mansalay and Bulalacao, Oriental Mindoro**

**Certified by:**

\_\_\_\_\_  
(Signature Over Printed Name of Supplier)

Contact: \_\_\_\_\_

Email Address: \_\_\_\_\_

**RFQ Delivered by:**

\_\_\_\_\_  
(Signature Over Printed Name of Canvasser)

Position: \_\_\_\_\_

Date / Time of Delivery: \_\_\_\_\_

Note: This form shall be used and issued in cases when RFQ is personally delivered to prospective supplier/service provider.