



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
 FIELD OFFICE - MIMAROPA
 1680 F.T. Benitez Corner Malvar Sts., Malate, Manila

REQUEST FOR QUOTATION

RFQ No. 2022-06-0145
 Date: June 23, 2022

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

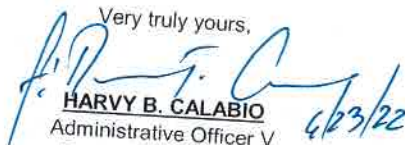
Sir/Madam:

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) 336-8106 to 07 loc. 111 or email to: iblagarde@dswd.gov.ph** not later than **5:00PM on June 27, 2022 (Monday)**.

Very truly yours,

HARVY B. CALABIO
 Administrative Officer V
 Procurement Section
 Telefax: 5336-8107 local 24052

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 5 days upon received of approved PO
- Place of Delivery: DSWD FO-MIMAROPA Malate Manila
- 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 to register"

JAYSON B. LAGARDE
 Procurement Officer
 5336-8107 local 24052

 Signature Over Printed Name
 (Supplier)



REQUEST FOR QUOTATION RECEIVING FORM

I Hereby certify that I _____, of _____

_____ has received the **Request for Quotation RFQ No. 2022-06-0145** from DSWD MIMAROPA Region intended for

Purchase of KBB - BP2P Office Supplies for KC-NCDDP Regional Program Management Team use.

Certified by:

(Signature Over Printed Name of Supplier)

Contact: _____

Email Address: _____

RFQ Delivered by:

(Signature Over Printed Name of Convasser)

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.

