



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

REQUEST FOR QUOTATION

RFQ No.: 2022-08-0783-NP-SVP

Date: August 8, 2022

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

Sir/Madam:

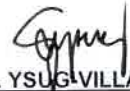
Please quote your government price/s including delivery charges, VAT or **other applicable taxes**, and other incidental expenses for the goods listed in **Annex A**. Failure to indicate information could be basis for non-compliance. Also, furnish us with descriptive brochures, catalogues, literatures 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, Mayor's 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. 24052 or email to: maediones@dswd.gov.ph** not later than **5:00 PM on August 15, 2022 (Monday)**.

Very truly yours,


PACITA NOREN L. YSUG-VILLAZORDA

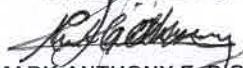
Administrative Officer IV

Procurement Section

AUG 08 2022

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: Seven (7) days upon receipt of approved Purchase Order (PO)
- Place of Delivery: SWAD Office Palawan (No. 54 H. Mendoza St. Puerto Princesa, Palawan)
- 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 specified 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"


MARK ANTHONY E. DIONES

Procurement Officer

Telefax: 5336-8106 to 07 loc. 24052

Signature Over Printed Name
(Supplier)



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office MIMaRoPa Region
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RFQ No.: 2022-08-0783-NP-SVP

Date: _____ (should be filled up by suppliers)

MOP: NP-SVP

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

| Item No. | Qty. | Unit | Item Description | Bidder's Specifications | Unit Cost | Total Cost |
|--|------|--------|--|-------------------------|-----------|------------|
| Lot | 339 | Bottle | Isopropyl Alcohol Main Ingredient: 70% Isopropyl Alcohol Net Weight/Volume: 1 Liter (Pump) Feature: Rubbing Alcohol Antiseptic and Disinfectant Rubbing Alcohol Antiseptic and Disinfectant, Kills 99.99% of Germs, Hypoallergenic with moisturizer >>>> NOTHING FOLLOWS <<<<< | | | |
| Date of Delivery: Seven (7) days upon receipt of approved Purchase Order (PO) | | | | | | |
| Area of Delivery: SWAD Office Palawan (No. 54 H. Mendoza St. Puerto Princesa, Palawan) | | | | | | |
| Contact Person: Edwin Policarpio AAI/SWAD Palawan Contact No: 0921-649-2995 | | | | | | |
| Approved Budget for the Contract: Php50,850.00 | | | | | | |
| "Failure to indicate information could be basis for non-compliance." | | | | | | |

PURPOSE: To Purchase Medicine/ Medical supplies for DSWD Field Office MIMAROPA Regional and Provincial Offices

PR No.: 2022-08-0783-NP-SVP

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 from the 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.

MARK ANTHONY E. DIONES

Procurement Officer
Telefax: 5336-8106 to 07 loc. 24052

(Signature over printed name)
Supplier

VAT
 Non-VAT