



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

REQUEST FOR QUOTATION

RFQ No. 2022-09-0182 NP - LOV  
Date: November 9, 2022

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

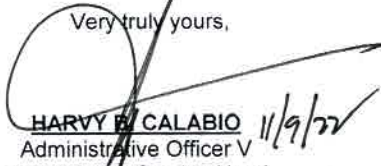
Sir/Madam:

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, PCAB License, 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 MIMAROPA Region -BAC Secretariat at 2nd Floor 1680 F.T. Benitez corner Malvar Sts., Malate, Manila or email to: [icgaga-a@dswd.gov.ph](mailto:icgaga-a@dswd.gov.ph) not later than **5:00 PM on November 14, 2022 (Monday)**. Quotations submitted to different email address(es) as stated above shall not be considered for evaluation. Please indicate in the subject of your email the title of the Project using this format: **[RFQ Number ], [Deadline of Submission]**.

Very truly yours,  
  
**HARVEY B. CALABIO** 11/9/22  
Administrative Officer V  
Procurement Section Head

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 12-15, 2022
- Place of Delivery: within National Capital Region
- Terms of Payment:  
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](http://www.philgeps.gov.ph) to register "

  
**JERICO C. GAGA-A**  
Procurement Officer  
Telefax: 5336-8106 to 07 loc. 24052  
Contact Number: 09652364341

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



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 2022-09-0182

Date: \_\_\_\_\_ (should be filled up by supplier)

MOP: NP- SVP

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

| Item No. | Qty. | Unit | PARTICULARS   | Bidder's Specifications (Please fill out the specifications in the space provided)           | Unit Cost | Total Cost |
|----------|------|------|---|--|-----------|------------|
| 1        | 60   | pax  | <b>Board and Lodging with meals for 3 days</b>  |  |           |            |
|          |      |      | Meals : AM Snack, Lunch, PM Snack and Dinner  |  |           |            |
|          |      |      | Plated : AM and PM Snacks (with cold beverage)  |  |           |            |
|          |      |      | Buffet : Lunch (Minimum of 3 viands with soup, dessert/fruits and cold drinks, no repetition of meals)  |  |           |            |
|          |      |      | <b>Title of the Activity:</b> Regional and Provincial Sustainability Planning cum Program Evaluation Workshop   |  |           |            |
|          |      |      | <b>Preferred Venue:</b> Within NCR  |  |           |            |
|          |      |      | <b>Date of Activity:</b> December 12-15, 2022   |  |           |            |
|          |      |      | <b>Guaranteed Pax:</b> 50 pax   |  |           |            |
|          |      |      | <b>Check In Date and Time:</b> December 12, 2022 ; 1:00 PM  |  |           |            |
|          |      |      | <b>Check Out Date and Time:</b> December 15, 2022 : 12:00 NN  |  |           |            |
|          |      |      | <b>Airconditioned Room double or triple Sharing with individual bed per pax and free toiletries</b>   |  |           |            |
|          |      |      | <b>Meal Schedule:</b>   |  |           |            |
|          |      |      | December 12, 2022 : PM Snacks and Dinner  |  |           |            |
|          |      |      | December 13, 2022 : Breakfast, AM Snacks, Lunch , PM Snacks and Dinner  |  |           |            |
|          |      |      | December 14, 2022 : Breakfast, AM Snacks, Lunch , PM Snacks and Dinner  |  |           |            |
|          |      |      | December 15, 2022 : Breakfast, AM Snacks and Lunch  |  |           |            |
|          |      |      | <b>Type of Food Serving:</b>  |  |           |            |
|          |      |      | Managed Buffet Breakfast, Lunch and Dinner, Plated Snacks   |  |           |            |
|          |      |      | Menu Selection: Hotel to submit menu ( minimum of at least 2 viands, soup and dessert)  |  |           |            |
|          |      |      | No repeating meal per menu  |  |           |            |
|          |      |      | <b>Inclusion:</b>   |  |           |            |
|          |      |      | 1. One (1) night complimentary superior room to be used by the organizers   |  |           |            |
|          |      |      | 2. Free use of Airconditioned Conference Room ( can accommodate more than 60 pax and free from noise which is detrimental to the event  |  |           |            |
|          |      |      | 3. No obstructing pillars in the conference room  |  |           |            |
|          |      |      | 4. Availability of electric outlets and free use of extension cords   |  |           |            |
|          |      |      | 6. With audio system and at least 2 microphones   |  |           |            |
|          |      |      | 7. Free use of projector and whiteboards  |  |           |            |
|          |      |      | 8. Free use of reliable and uninterruptible wifiFree use of parking space   |  |           |            |
|          |      |      | 9. Free flowing coffee and drinking water   |  |           |            |
|          |      |      | 10. Food to be served should have vegetables and fruits and can adjust for Muslim and non pork eaters.  |  |           |            |
|          |      |      | 11. Free use of parking space   |  |           |            |
|          |      |      | 12. Facilities must be PWD and Senior Citizen Friendly  |  |           |            |
|          |      |      | 13. Must be structurally sound, have fire escapes and firefighting equipments and CCTV  |  |           |            |
|          |      |      | 14. Free Tarpaulin/Backdrop   |  |           |            |
|          |      |      | 15. Free use of facilities and amenities (if applicable)  |  |           |            |
|          |      |      | 16. Free Tarpaulin/Backdrop   |  |           |            |
|          |      |      | NOTE: Hotel/Restaurants/Resorts should not be offering short term lodging associated with motel and should not be situated beside or across gambling establishment shops, night clubs, funeral parlors, mortuaries and other similar like |  |           |            |
|          |      |      | <b>***Nothing follows***</b>  |  |           |            |
|          |      |      | Approved Budget for the Contract  |  |           |            |
|          |      |      | Three Hundred Sixty Thousand Pesos only   |  |           |            |
|          |      |      | Php 360,000.00  |  |           |            |
|          |      |      |   | Note: Please specify brand model/origin .Please fill up the space for Bidder's specification |           |            |
|          |      |      |   | "Failure to indicate information could be basis for non-compliance."                         |           |            |

PURPOSE: Board and Lodging with meals for the Regional and Provincial Sustainability Planning cum Program Evaluation Workshop

PR No.: 2022-09-0182

VAT  
 Non-VAT

\_\_\_\_\_  
(Signature over Printed name)  
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.



REQUEST FOR QUOTATION RECEIVING FORM

I Hereby certify that I \_\_\_\_\_, of

\_\_\_\_\_ has received the **Request for**

**Quotation RFQ No.** 2022-09-0182 from DSWD MIMAROPA Region intended for the

**Board and Lodging with meals for the Regional and Provincial Sustainability Planning cum Program Evaluation Workshop**

**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.