



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

REQUEST FOR QUOTATION

RFQ No.: 2023-03-05171-NP-SVP

Date: March 24, 2023

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 (if applicable), PhilGEPS Certificate, latest Income/Business Tax Return and a notarized or unnotarized Omnibus Sworn Statement in accordance with the attached format marked as Annex B**. If awarded, please submit immediately the duly notarized Omnibus Sworn Statement (if previously submitted is unnotarized). 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: procurement.fomimaropa@dswd.gov.ph** not later than **5:00 PM on March 31, 2023 (Friday)**. 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**

Administrative Officer V  
Procurement Section Head

3-24/2023

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: Fifteen (15) Calendar Days upon receipt of Approved Purchase Order (PO)
- Place of Delivery: As indicated on the Annex A
- 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](http://www.philgeps.gov.ph) to register"

**DAVE T. CORCORA**

Procurement Officer

Telefax: 5336-8106 to 07 loc. 24052

Signature Over Printed Name  
(Supplier)



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RFQ No.: 2023-03-0517-NP-SVP

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	Bidder's Specifications (Please fill out the specifications in the space provided) NOTE: Supplier must state here either the statement of compliance either "COMPLY" or "NOT COMPLY". Failure to indicate information could be basis for non-compliance"	Unit Cost	Total Cost
1	3,000	piece	<b>PURCHASE OF FAMILY FOOD PACK BOXES FOR SWADT WAREHOUSES</b>  <b>Specifications:</b> > RSC Size: 160mm (H) x 395mm (L) x 295mm (W) (+/-5%) > Thickness: 7mm (+/- 10% variance) > Print Color: Red, Yellow and Blue > DSWD Logo: Based on DSWD Branding Guidelines  <b>Note:</b> > See attached illustration > Inclusive of Hauling Fee  <b>Proofing:</b> > 1st Draft - 2 working days upon receipt of approved PO > 2nd Draft - 2 working days upon receipt of 1st draft >>>>> NOTHING FOLLOWS <<<<<<  <b>Date of Delivery:</b> Seven (7) calendar days upon receipt of final proofing <b>Areas of Delivery:</b> <b>1. SWADT OCCIDENTAL MINDORO WAREHOUSE (1,000 pieces)</b> Address: Rachel Estacio Warehouse, San Jose, Occidental Mindoro Contact Person: MS. KURTNEY SAMSON Contact Number: 0977-330-0092  <b>2. SWADT MARINDUQUE WAREHOUSE (1,000 pieces)</b> Address: Brgy. Amoingon, Boac, Marinduque Contact Person: MS. MA. LUISA LANARIO Contact Number: 0998-390-5119  <b>3. SWADT ROMBLON WAREHOUSE (1,000 pieces)</b> Address: Brgy. Poctoy, Odiongan, Romblon Contact Person: MR. MELZANDRO A. MARIANO Contact Number: 0950-357-6365  <div style="border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center; width: fit-content; margin: 10px auto;"> <b>TOTAL APPROVED BUDGET FOR THE CONTRACT</b>  <b>Two Hundred Fifty-Five Thousand Pesos Only</b>  <b>(Php 255,000.00)</b> </div>		
			<b>PAGE 1 OF 1</b>		

Note: Please specify brand model/origin.

PURPOSE: Purchase and Delivery of Family Food Packs (FFP's) Boxes for SWADT Warehouses.

PR No.: 2023-03-0520-NP-SVP

☐ 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 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.