

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

REQUEST FOR QUOTATION

		RFQ No. 2023-04-0604 NP-SVP
		Date April 14, 2023
Company Name	Y	
Company Address	Ñ	
Contact Person	 	
Contact No.	E	***************************************
Email Address	:-	
Company TIN	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
PATRICIPAL PROPERTY AND AND ADDRESS OF THE PARTY OF THE P		
PhilGEPS Reg. No.	× 1	
Sir/Madam:		
expenses for the good		harges, VAT or other applicable taxes, and other incidental icate information could be basis for non-compliance. Also, es and/or samples, if applicable.
	anufacturer, distributor, or agent in trized certification to this effect.	he Philippines for goods listed in Annex A, please attach in your
PhilGEPS Certificate in accordance with to Omnibus Sworn State	e, latest Income/Business Tax Ret the attached format marked as An	siness Permit, Mayor's Permit , PCAB License (if applicable), urn and a notarized or unnotarized Omnibus Sworn Statement nex B. If awarded , please submit immediately the duly notarized otarized. The Certificate of Platinum Membership maybe LGEPS Registration Number.
1680 F.T. Benitez con 5:00 PM on APRIL 2	ner Malvar Sts., Malate, Manila, <u>or c</u> 1, 2023 (Friday). Quotations submit tion. Please indicate in the subject of	nex A to DSWD MIMAROPA Region -BAC Secretarial at 2nd Flooremail to: procurement.fomimaropa@dswd.gov.ph not later than ed to the different email addresses (es) as stated above shall not be if your email the title of the Project using this format: [RFQ Number]
I. IDeadine of Subir	iissionj.	Very truly yours
Towns and Condition		HARVY CALABIO 4/14/23 Administrative Officer V Procurement Section Head
Terms and Conditio		
 Award shall be Price Validity sl Services shall t 	nall be valid until: One Hundred Tw	
Place of Delive		
	ent: within 30 days upon final in	spection and acceptance emandable Accounts Payable- Advice to Debit Account)
	o:	
Bank Name:		Branch:
6. Liquidated Dan	and Bank of the Philippines accou	nts shall be charged a service fee tre to make full delivery within the time specified above,
		t least equal to one-tenth of one percent (0.001) of the cost of
the unperform	ed portion for every day of delay s	hall be imposed. Once the cumulative amount of liquidated
damages reac	hes ten percent (10%) of the amou	int of contract, the Procuring Entity may rescind or terminate of action and remedies available under the circumstances.
	se indicate brand, model and countr	
	repancy between unit cost and total	
 Please indicate NOTE: "Pro 	warranty:	ed at the Philippine Government Electronic Procurement System
(Phil	GEPS). You may visit the PhilGEP	S website at www. philgeps.gov.ph to register "
LOP	ETTA GILIGOP	
	urement Officer	
50	er: 5328-5111 to 15 loc. 24052	Signature Over Printed Name
Contact N	umber: 09984746898	(Supplier)

Procurement Form No. 04-A (Annex A)

DSWD
MIMAROPA
REGION

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

PhilGEF	PS Reg.	No.	1:			
Item No.	Qty.	Unit	PARTICULARS	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	1	Van	VAN RENTAL for 14 Days (On-Call)			
			To be used of DSWD SWADT CIS during PSP-AICS Payout			
			VEHICLE TYPE: Commuter Van, 15-16 Seater Excluding the Driver, With Not Less Than 4-Doors			
			DATE OF SERVICE:		-	
			For a Period of APRIL TO JUNE 2023 (14 Days On Call)			
-			AREA OF VEHICLE SERVICE:			
			Within the Province of ORIENTAL MINDORO			
			DROP OFF AND PICK UP POINT PLACE			
			Place to be Arrange within the Province of ORIENTAL MINDORO			
			TIME OF DROP-OFF AND PICK-UP:			
			Between 7:00 AM to 8:00 AM and 5:00 PM			
			SPECIFICATIONS:			
			Air-Conditioned Passenger Van with Seat Headrest			
			Can Accommodate of at least 15-16 Passengers			
			Disinfected Vehicle			
	-	-	INCLUSION:			
-	+		Service Provider to Shoulder Meals and Load Allowance of Driver			
	-	_	1 Driver per Vehicle			
			Passenger's Insurance Against Accidental including All Expenses on Medical (including but limited to medical laboratory/hospitalization/medicines and other procedures needed)			
			Gas, Toll and Parking Fees, Maintenance of Vehicle, and Other Charges Expenses to shoulder by the Service Provider throughout the contract period			
			OTHER REQUIREMENTS:			
			Licensed Driver			
			Driver must be COVID-19 Negative and FULLY Vaccinated (Medical Certificate/Vaccine Card as Proof)			
			MODE OF PROCUPENENT, Coverement Procupers			
	-	-	MODE OF PROCUREMENT: Government Procurement ********NOTHING FOLLOWS**********************************			
		-	NOTHING FOLLOWS			
		1				
	-	-	TOTAL APPROVED BUDGET FOR THE CONTRACT:	Note: Please specify the brand model/origin		
-		-	One Hundred Twelve Thousand Pesos Only (Php 112,000.00)	modellongin		

URPOSE:	Van Dantal to be used of	DSWD SWADT CIS during PSP-AICS Payout (Oriental Mindoro	A
UKPOSE:	vali Rental to be used bi	DOWN SWAD I CIS during FSF-AICS FAVOURFOIREILLAI MINGOID	и.

PR No.: 2023-04-0604 NP-SVP

(Signature over Printed name)
Supplier