

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

1680 F.T. Benitez corner Malvar Sts., Malate, Manila

REQUEST FOR QUOTATION

		RFQ No.:	2023-03-0533-NP-SVP
		Date:	April 11, 2023
Company Name			
	·		
Company Address	*		
Contact Person	2		
Contact No.			
Email Address	<u>:</u>		
Company TIN	4		
PhilGEPS Reg. No.	1		
Sir/Madam:			
expenses for the goo	overnment price/s including delivery charged by listed in Annex A . <u>Failure to indicate</u> iptive brochures, catalogues, literatures and	information could be	e basis for non -compliance. Also,
	nanufacturer, distributor, or agent in the Parized certification to this effect.	hilippines for goods lis	ted in Annex A, please attach in your
PhilGEPS Certificat Statement in accord duly notarized Omnit	attach copies of your Company's Busines te, latest Income/Business Tax Return a dance with the attached format marked bus Sworn Statement (if previously submit submitted in lieu of the Mayor's /Business	and a notarized or un as Annex B. If award ted is unnotarized. The	notarized Omnibus Sworn ed , please submit immediately the ne Certificate of Platinum
Floor 1680 F.T. Beni later than <u>5:00 PM o</u> shall not be consider	and submit this form together with Annex Antez corner Malvar Sts., Malate, Manila or on April 18, 2023 (Tuesday). Quotations are for evaluation. Please indicate in the speadline of Submission].	email to: procuremer submitted to different e	nt.fomimaropa@dswd.gov.ph not email address(es) as stated above
			Very truly yours,
		/ —	ARVY B. CALABIO 4/11/2023 ministrative Officer V urement Section Head
Terms and Condition	ons:		
Award shall be r	made on per: litem basis	x total quoted price	lot basis
	all be valid until: One Hundred Twenty (120)) Calendar days	
3 Services shall b	e delivered on Fifteen (15) Calendar Days	upon receipt of Appro	ved Purchase Order (PO)
Place of Deliver			pbangalon, Boac, Marinduque)
5. Terms of Payme	ent: within 15-30 days upon final inspect h LDDAP-ADA (List of Due and Demandab		dvice to Debit Account)
Account Name			umber:
Bank Name:		Branch:	
	nd Bank of the Philippines accounts shall	be charged a service fe	ee
Liquidated Dam the amount of	the liquidated damages shall be at least eq		he time specified above,
the unperforme	ed portion for every day of delay shall be in	nposed. Once the cum	ulative amount of liquidated
damages react	nes ten percent (10%) of the amount of con	tract, the Procuring En	tity may rescind or terminate
	thout prejudice to other courses of action		under the circumstances.
	se indicate brand, model and country of origin epancy between unit cost and total cost, unit c		
9. Please indicate	warranty		
	spective supplier must be registered at the Phili		
(Shill	GEPS). You may risit the PhilGEPS website at w	ww. philgeps.gov.ph to r	egister
Vi-	1. 1		
DAVE	T. CORCORO		
	urement Officer		Signature Over Printed Name

Telefax: 5336-8106 to 07 loc. 24052

(Supplier)

DSWD REGION

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

1680 F.T. Benitez corner Malvar Sts., Malate, Manila

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 No.: 2023-03-05	33-NP-SVP
Date:	(should be filled up by supplier
MOP: NP- SVP	

Company Name :				MOP: NP- SVP		
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	ct Pers	on				
Contact No. Email Address			3			
		s	9			
	714		<u>*</u>			
omp	any TIN	i.	<u> </u>			
hilG	EPS Re	g. No.				
tem 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	75	piece	PLASTIC STORAGE BOX, 67 Liters, transparent			
		-	>>>> NOTHING FOLLOWS <<<<			
			Date of Delivery: Fifteen (15) Calendar Days upon receipt of approved			
			Purchase Order (PO)			
			Area of Delivery: SWADT Marinduque Office (Capitol Compound,			
			Brgy, Bangbangalon, Boac, Marinduque)			
			Contact Person: MS, HELEN B ALCOBA			
_			Contact Number: 0961-333-1372			
	-		Contact Number, 050 1-555-1572			
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TOTAL APPROVED BUDGET FOR THE CONTRACT Sixty Thousand Pesos Only

Purchase & Delivery of Plastic Storage Box for the use of CIS PSP-AICS in SWADT Marinduque Office for the 2nd Quarter of CY-2023.

(Php 60,000.00)

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2023-03-0533-NP-SVP VAT PR No.: Non-VAT

> (Signature over printed name) Supplier

Note: Please specify brand model/origin.

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.