

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

REQUEST FOR QUOTATION

		R	FQ No. KC-2023-05-0143
		D	ate: May 26, 2023
Company Name	9		
Company Address	2		
	2		
Contact Person		*************************************	
Contact No.			
Email Address	}		
Company TIN	3		
PhilGEPS Reg. No.	å.		
Sir/Madam:			
expenses for the good		licate information coul	pplicable taxes, and other incidental d be basis for non -compliance. Also, oplicable.
	anufacturer, distributor, or agent in rized certification to this effect.	the Philippines for goods	s listed in Annex A, please attach in your
PhilGEPS Certificate accordance with the Omnibus Sworn State	, latest Income/Business Tax Ref attached format marked as Anne	turn and a notarized or ex B. If awarded , please notarized. The Certifica	s Permit , PCAB License (if applicable), unnotarized Omnibus Sworn Statement in submit immediately the duly notarized te of Platinum Membership maybe imber.
1680 F.T. Benitez cor 5:00 PM on June 2, 2	ner Malvar Sts., Malate, Manila <u>or e</u> 2023 (Friday). Quotations submitted tion. Please indicate in the subject of	email to: kcmimaropa-pd to different email addre	OPA Region -BAC Secretariat at 2nd Floor or
			HARVY B CALABIO Administrative Officer V Procurement Section Head
Terms and Condition	ns:		Trooms in the second research
Award shall be a Price Validity sh Services shall be	made on per:item basis all be valid until: <u>One Hundred Tv</u> e delivered on: November 6 - 10,	X total quoted penty (120) Calendar d	
4. Place of Deliver	y: Within National Capital Reg	jion or CALABARZON	
	ent: within 30 days upon final in		
	h LDDAP-ADA (List of Due and D :		Payable- Advice to Debit Account) Account Number :
Bank Name:	0.5	E	Branch:
**Note: Non La 6. Liquidated Dam	and Bank of the Philippines accou		y within the time specified above,
the amount of the unperform damages reacl	the liquidated damages shall be a ed portion for every day of delay hes ten percent (10%) of the amo	at least equal to one-te shall be imposed. Onc unt of contract, the Pro	nth of one percent (0.001) of the cost of e the cumulative amount of liquidated ocuring Entity may rescind or terminate
the contract w	thout prejudice to other courses	of action and remedies	s available under the circumstances.
	se indicate brand, model and countre epancy between unit cost and total		ail.
9. Please indicate	warranty:		
10. NOTE: "Pro	pective supplier must be registe EPS). You may visit the PhilGEF		overnment Electronic Procurement System ilgeps.gov.ph to register "
	Superior		
	ANN M. DOMINGO		
<u>Prοςι</u> Telefax: 5336-810	htement Officer		Signature Over Printed Name
			Company of the second s

Contact Number: 0910-750-7941

(Supplier)

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

RFQ No.: KC-2023-05-0143 Date: _____ MOP: SHOPPING FOR NON-CONSULTING SERVICES

	must be registered at the Philippine Government Electronial GEPS). You may visit the Phili.GEPS website at glister
Company Name	ii
Company Address	
Contact Person	
Contact No.	4
Email Address	The state of the s
Company TIN	(T
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item No.	Qty	Unit	PARTICULARS	(Please fit 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
-	450		Board and Lodging for 2 days and 2 nights	1100		
1	150	-				
2	260	pax	Board and Lodging for 2 days and 2 nights			
			Meals: Breakfast, AM Snacks, Lunch, PM Snacks, and Dinner			
-			Plated: AM Snacks & PM Snacks (with cold beverage)			
			Buffet: Breakfast, Lunch and Dinner (Minimum of 3 viands with soup, dessert/fruits and cold drinks, no repetition of meals)			
			Title of the Activity: Year-End and Stakeholders' Regional Program Review Evaluation Workshop			
			Preffered Venue: Within National Capital Region or CALABARZON			
			Date: November 6 - 10, 2023			
			Guaranted Pax (Item No. 1): 135 Pax per conduct of activity			
			Guaranted Pax (Item No. 2): 234 Pax per conduct of activity			
	-		Check In & Out Schedule of 150 participants			
-			Check In Date and Time: November 6, 2023 at 1:00 PM -150 pax			
_	-	-	Check Out Date and Tim: November 8, 2023 at 12:00 Noon -150 pax			
		-	Check In & Out Schedule of 260 participants			
	-	-	Check In Date and Time: November 8, 2023 at 1:00 PM -260 pax			
		-	Check Out Date and Tim: November 10, 2023 at 12:00 Noon -260 pax Airconditioned Room Double Sharing, Triple Sharing or Quad Sharing with individual bed per pax and free toiletries			
	-		Meal Schedule:			
	-	-				-
		-	November 6, 2023 : PM Snacks and Dinner (150 pax)			
	-	-	November 7, 2023 : Breakfast, AM Snacks, Lunch, PM Snacks, and Dinner (150 pax)			
	-		November 8, 2023 Breakfast, AM Snacks, and Lunch (150 pax)			
			November 8, 2023 : PM Snacks and Dinner (260 pax)			
	-		November 9, 2023 Breakfast, AM Snacks, Lunch, PM Snacks, and Dinner (260 pax)			
			November 10, 2023 : Breakfast, AM Snacks, and Lunch (260 pax)			
			Type of Food Serving:			
			Menu Selection: Hotel to submit menu with minimum of at least 3 viands, soup, dessert/fruits and cold drinks. Should include vegetables per meal.			
			No repeating of meals per menu and with flexibility to participants with food restriction			
			Inclusions:			
			One (1) night complimentary superior room to be used by the organizers.			
			Free use of airconditioned function hall, dedicated projector, and sound system (microphone - 3 unit, stereo speakers) that can accommodate 300 pax and free from noise which is detrimental to the event.			
			Inclusion of welcome signage or tarpaulin	<u> </u>		
			 Airconditioned Conference Room can be use starting 8:00 am of DAY 1 for arriving of participants. 			
			No obstructing pillars in the conference room.			
			Availability of electric outlets and free use of extension cords.			
			7. With audio system and at least 5 microphones.			1 1217 012 112
			8. Free use of projector and whiteboards. Can set up multiple projectors in the venue.			
		9. Free use of reliable and uninterruptible wifi connection.			-	
			10. Free use of parking space.			
			11. Free flowing coffee and drinking water.			
	1	1	12. Facilities must be PWD and Senior Citizen Friendly.			
	1		13. Must be structurally sound, have five escapes and firefighting equipments and CCTV.			
			14. Free tarpaulin/backdrops (1-inside and 1-outside of conference hall)			
			15. Free use of facilities and amenities (if applicable)			
			NOTE: Hotel/Restaurants/Resorts should not be offering short tearm lodging associated with motel and should not be situated beside or across gambling establishments shops, night clubs, funeral parlors, mortauries, and other similar alike.			
	1	1	***Nothing follows***		· · · · · · · · · · · · · · · · · · ·	
	+	-	Page 1 of 1			
			TOTAL APPROVED BUDGET FOR THE CONTRACT: One Million Eight Hundred Four Thousand Pesos only (Php1,804,000.00)	Note: Please specify brand model/origin .		
PURP	OSE:	Board	and Lodging for the conduct of Year-End and StateRolders Regional Program Review Evaluation Workshop	de la companya de la		W.
PR No	60	KC-20	23-05-0143		- A	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 OSWD's future biddings.



provider.

REQUEST FOR QUOTATION RECEIVING FORM

Hereby certify that I		
		has received the Request for
Quotation RFQ No.	KC-2023-05-0143	from DSWD MIMAROPA Region intended for the
Board and Lodging fo	r the conduct of Year-End	and Stakeholders' Regional Program Review Evaluation Workshop
Certified by:		
Signature Over Printed	d Name of Supplier)	
Email Address:		
RFQ Delivered by:		
Signature Over Printed	d Name of Canvasser)	
Date / Time of Delivery	P	

Note: This form shall be used and issued in cases when RFQ is personally delivered to prospective supplier/service