DSWD MIMAROPA REGION

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

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

REQUEST FOR QUOTATION

RFQ No.: 2023-07-0895 NP-SVP
Date: July 11, 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 July 18, 2023 (Tuesday).** 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,

HARVY B. CALABIO 7/11/2023
Administrative Officer V
Procurement Section Head

Terms and Conditions:

1. Award shall be made on per: ☐ item basis ☒ total quoted price ☐ lot basis
2. Price Validity shall be valid until: **One Hundred Twenty (120) Calendar days**
3. Services shall be delivered on: **Fifteen (15) Calendar Days upon receipt of Approved Purchase Order (PO)**
4. Place of Delivery: **SWADT Occidental Mindoro Office (M.H. Del Pilar St., Brgy. 7, San Jose, Occidental Mindoro)**
5. 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
6. 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.**
7. For goods please indicate brand, model and country of origin.
8. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
9. Please indicate warranty: _____
10. **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"**

DAVE T. CORCORO
Procurement Officer
Telefax: 5336-8106 to 07 loc. 24052

_____
Signature Over Printed Name
(Supplier)

Procurement Form No. 04-A (Annex A)

Annex A

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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.: 2023-07-0895 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	128	piece	PLASTIC STORAGE BOX, 87 Liters, Transparent			
			>>>>> NOTHING FOLLOWS <<<<<			
			Date of Delivery: Fifteen (15) Calendar Days upon receipt of			
			approved Purchase Order (PO)			
			Area of Delivery: SWADT Occidental Mindoro Office (M.H. Del Pilar			
			St., Brgy. 7, San Jose, Occidental Mindoro			
			Contact Person: MS. SHEILA D. SARABIA			
			Contact Number: 0915-959-8195			
			TOTAL APPROVED BUDGET FOR THE CONTRACT Ninety-Nine Thousand Eight Hundred Forty Pesos Only (Php 99,840.00)			
				Note: Please specify brand model/origin.		
			PAGE 1 OF 1			

PURPOSE: Purchase & Delivery of Plastic Storage Box for the use of CIS PSP-AICS Staff in SWADT Occidental Mindoro Office for the 3rd Quarter of CY-2023.

PR No.: 2023-07-0895 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 in DSWD's future biddings.*