

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region 1680 F.T. Benitez corner Malvar Sts., Malate, Manila

REQUEST FOR QUOTATION

		Parte: August 17, 2023
		Date. August 17, 2020
Company Name	7	
Company Address		
Contact Person	Ť.	
Contact No.	¥	
Email Address		
Company TIN	**************************************	
PhilGEPS Reg. No.	3	
Sir/Madam:	(1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
goods listed in Annex	rernment price/s including delivery charges, VAT or other applic A. Failure to indicate information could be basis for not literatures and/or samples, if applicable.	
If you are exclusive moduly notarized certificate	anufacturer, distributor, or agent in the Philippines for goods list tion to this effect.	ed in Annex A, please attach in your quotation a
Certificate, latest Inco attached format mar	tach copies of your Company's Business Permit, Mayor's Perome/Business Tax Return and a notarized or unnotarized Omited as Annex B. If awarded, please submit immediately the unnotarized. The Certificate of Platinum Membership maybe tration Number.	nibus Sworn Statement in accordance with the ne duly notarized Omnibus Sworn Statement (if
Benitez corner Malva 2023(Thursday). Quo	d submit this form together with Annex A to DSWD MIMAROPA or Sts., Malate, Manila or email to: ccrvictorio@dswd.gov tations submitted to different email address(es) as stated above of your email the title of the Project using this format: [RFQ Num	<u>v.ph</u> not later than <u>5:00 PM on August 14,</u> re shall not be considered for evaluation. Please
		HARVY B. CALABIO Administrative Officer V Procurement Section Head
Terms and Condition	s:	
Award shall be n Price Validity sha	nade on per: item basis X total quo all be valid until: One Hundred Twenty (120) Calendar days	eted price lot basis
	e delivered on: Period of August (On Call basis for 7 days)	
4. Place of Delivery	Province of Palawan	
	ent: within 30 days upon final inspection and acceptance In LDDAP-ADA (List of Due and Demandable Accounts Payabl	a Advice to Debit Account)
		t Number :
Bank Name:	Branch: and Bank of the Philippines accounts shall be charged a service	
6. Liquidated Dama	2007 Met 18 18 18 18 18 19 19 19 19 19 19 19 19 19 19 19 19 19	in the time specified above,
the amount of t	he liquidated damages shall be at least equal to one-tenth of	one percent (0.001) of the cost of
the unperforme	ed portion for every day of delay shall be imposed. Once the cost ten percent (10%) of the amount of contract, the Procuring	Entity may rescind or terminate
the contract wit	thout prejudice to other courses of action and remedies avail	able under the circumstances.
	e indicate brand, model and country of origin. epancy between unit cost and total cost, unit cost shall prevail.	
9. Please indicate	warranty	
	pective supplier must be registered at the Philippine Government of the Ph	
ARIEL	G. SAMPAN	
Procu	rement Officer	
Telefax: 5336-8106 Contact Number:		Signature Over Printed Name (Supplier)



Procurement Form No. 04-A (Annex A) 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 2023-08-1065 REO No Procurement System (PHILGEPS). You may visit the PHILGEPS website at www.philgeps.gov.ph to register Date: (should be filled up by suppplier) Company Name MOP: NP-SVP Company Address Contact Person Contact No. **Email Address** Company TIN PhilGEPS Reg. No. Bidder's Specifications Item (Please fill out the specifications in the space provided) NOTE: Supplier must state Total Cost Qty. Unit **PARTICULARS** Unit Cost No here either the statement of ompliance either "COMPLY or "NOT COMPLY". "Failure to indicate information could be Van Rental for 7 days (On-call) 1 unit 1 Intended for the Cash for Work in Connection with Oil Spill in the Province of Palawan Venue: Province of Palawan Period of August (On Call) Drop-off and Pick-up point place: Place to be arranged within the Province of Oriental Mindoro Time of Drop-off and Pick-up between 7 00-8 00 AM and 5 00 PM Vehicle Specifications: Hi-Ace Commuter Van 16 seater with not less than 4 doors Can accommodate 15-16 passengers Inclusions: 1 driver per vehicle Gas, oil, and other repair and maintenance of vehicle throughout the contract period Load allowance of driver to contact passengers Fee and Taxes: Passengers insurance againts accidental including all expenses on medical (including but limited to medical laboratory / hospitalization / medicine and other procedures needed) Other requirements: Licensed driver Driver must be Covid-19 negative and fully vaccinated (Medical certificate / Vaccine Card as proof) ***nothing follows*** TOTAL APPROVED BUDGET FOR THE CONTRACT: Note: Please specify Seventy Thousand Pesos Only brand model/origin. (Php 70,000.00)

PURPOSE:

Van Rental for the Cash for Work Implementation in Connection with Oil Spill in the Province of Palawan

PR No.:

2023-08-1065 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 Section within three (3) days from the date advance copy was served thru email. F AILURE 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.