



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

REQUEST FOR QUOTATION

RFQ No. 2023-09-1182 NP-SVP
Date: September 11, 2023

Company Name _____
Company Address _____
Contact Person _____
Contact No. _____
Email Address _____
Company TIN _____
PhilGEPS Reg. No. _____

Sir/Madam:

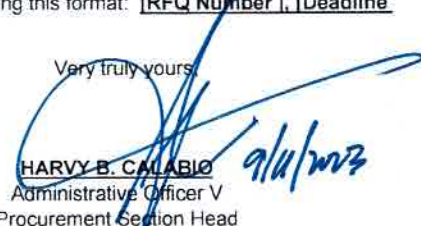
Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in **Annex A**. **Failure to indicate information could be basis for non-compliance**. Also, furnish us with descriptive brochures, catalogues, literatures 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: ejcnolasco@dswd.gov.ph not later than **5:00 PM on September 18, 2023 (Monday)**. 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
Administrative Officer V
Procurement Section Head

Terms and Conditions:

- Award shall be made on per: ☐ item basis ☒ total quoted price ☐ lot basis
- Price Validity shall be valid until: One Hundred Twenty (120) Calendar days
- Services shall be delivered on: October 24 and 27, 2023
- Place of Delivery: Please see attached Annex A for complete details of Itinerary
- Terms of Payment: within 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**
- 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.
- For goods please indicate brand, model and country of origin.
- In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- Please indicate warranty: _____
- 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"


EMMA JOY C. NOLASCO

Telefax: 5336-8106 to 07 loc 24052
Contact Number: **09994602492**

Signature Over Printed Name
(Supplier)



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 2023-09-1182 NP-SVP

Date: _____ (should be filled up by bidder)

MOP: NP-SVP

Company Name: _____
Company Address: _____
Contact Person: _____
Contact No.: _____
Email Address: _____
Company TIN: _____
PhilGEPS Reg. No.: _____

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
			Service Provider for the vehicle rental during the conduct of Finalization Workshop on the Harmonized Reporting Template			
			Preferred Venue: El Nido, Palawan			
			No. of Pax: at least 12 pax per van			
1	7	unit	Van Vehicle			
			Itinerary:			
			October 24, 2023			
			Pick up Date: Tuesday, October 24, 2023			
			Pick up Point: Puerto Princesa City, Palawan International Airport			
			Drop-off Point: El Nido, Palawan			
2	7	unit	Van Vehicle			
			Itinerary:			
			October 27, 2023			
			Pick up Date: Friday, October 27, 2023			
			Pick up Point: El Nido, Palawan			
			Drop-off Point: Puerto Princesa City, Palawan International Airport			
			Provision of Services:			
			Duration: 8 hours			
			Call Time: (to be advised before the activity)			
			Driver, Fuel and Gasoline provided by the Operator			
			Passenger Van:			
			1. Four-wheeled and airconditioned passenger van vehicle with at least 12 seats excluding the driver			
			Other Inclusions:			
			1. Driver, driver's salary/ meals, fuel, toll fees, parking fees including repairs and maintenance of vehicle throughout the contract period			
			2. Passenger's insurance against accidents including all expenses on medical (including but not limited to laboratory/ hospitalization/ medicines, and other procedures needed) and accidental death benefit insurance for the passengers in the event of an accident during the rental period			
			3. Tax included			
			4. Load allowance for the driver to contact passengers included			
			5. Billing to be forwarded to Regional Operations one (1) day after the activity			
			*****NOTHING FOLLOWS*****			
			TOTAL APPROVED BUDGET FOR THE CONTRACT: One Hundred Five Thousand Pesos Only (Php105,000.00)			
			PAGE 1 OF 1			
				Note: Please specify brand model/origin		

PURPOSE: Service Provider for the vehicle rental during the conduct of Finalization Workshop on the Harmonized Reporting Template

PR No.: 2023-09-1182 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. 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.