



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

REQUEST FOR QUOTATION

RFQ No. 2024-01-0088 NP-SVP

Date: February 6, 2024

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

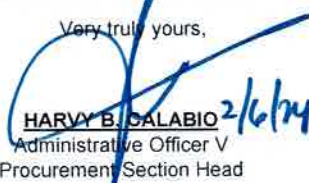
Sir/Madam:

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: ccrvictorio@dswd.gov.ph** not later than **5:00 PM on February 13, 2024 (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. SALABIO 2/6/24
 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: Scheduled dates of the activities (10 meetings)
- Place of Delivery: DSWD MIMAROPA FO 1680 F.T. Benitez St. cor Malvar St., Malate, Manila
- 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 "

CATHERINE CATHY R. VICTORIO
 Procurement Officer
 Telefax: 5336-8106 to 07 loc. 24052
 Contact Number: 09984746898

Signature Over Printed Name
 (Supplier)



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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	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	Unit Cost	Total Cost
1	28	pax	Catering Service (Party Tray) for 10 meetings			
	25 guaranteed	pax	Project Management Meeting, Technical Assistance, Workshops and Trainings with Concerned OBSUs and other Stakeholders			
			Venue: DSWD MIMAROPA FO 1680 F.T. Benitez St. cor Malvar St., Malate, Manila			
			Venue: ICTMS Room			
			Dates:			
			March 25, 2024			
			April 26, 2024			
			May 31, 2024			
			June 28, 2024			
			July 26, 2024			
			August 30, 2024			
			September 27, 2024			
			October 25, 2024			
			November 29, 2024			
			December 18, 2024			
			Provisions:			
			AM snack, Lunch, PM snack			
			Food to be served in Party Trays must be enough for the total no. of pax			
			Note:			
			Caterer shall submit menu proposed of the day one (1) week			
			Food shall be freshly cooked and prepared on the day of the activity			
			End-user shall inform the Service Provider one to two weeks the exact dates prior to the conduct of the activities			
			Free inclusions:			
			Free flowing coffee / candies/ nuts / milo			
			nothing follows			
			TOTAL APPROVED BUDGET FOR THE CONTRACT:			
			One Hundred Frotly Thousand Pesos Only			
			(Php 140,000.00)			
				Note: Please specify brand model/origin .		

PURPOSE: Project Management Meeting, Technical Assistance, Workshops and Trainings with Concerned OBSUs and other Stakeholders
PR No.: 2024-01-0088 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.