



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

REQUEST FOR QUOTATION

RFQ No. 2024-06-0595 NP-LOV  
 Date: June 25, 2024

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

Sir/Madam:

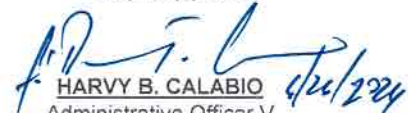
Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. **Failure to indicate information could be basis for non-compliance.** Also, furnish us with descriptive brochures, catalogues, literatures and/or 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 may be submitted in lieu of the Mayor's /Business Permit and PHILGEPS Registration Number.

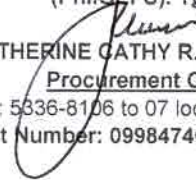
Please accomplish and submit this form together with Annex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor 1680 F.T. Benitez corner Malvar Sts., Malate, Manila or email to: [ccrvictorio@dswd.gov.ph](mailto:ccrvictorio@dswd.gov.ph) not later than **5:00 PM on July 2, 2024 (Tuesday)**. Quotations 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. 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: July 16-19, 2024 and September 17-20, 2024
- Place of Delivery: Metro 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](http://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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Company Name : \_\_\_\_\_  
Company Address : \_\_\_\_\_  
Contact Person : \_\_\_\_\_  
Contact No. : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Company TIN : \_\_\_\_\_  
PhilGEPS Reg. No. : \_\_\_\_\_

MOP: NP-LOV

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
			<b>Board and Lodging for 2 sessions (3 days per session)</b>			
			Board and Lodging for the conduct of PSD CY 2024 Mid-Year and Year-End Program Review and Evaluation Workshop			
			Venue: Metro Manila			
1	68	pax	<b>Date: July 16-19, 2024</b>			
			58 guaranteed pax	Check in: July 16, 2024 / 12:00 PM		
				Check out: July 19, 2024 / 12:00 PM		
			<b>Approved Budget Cost: Php 530,400.00</b>			
1	70	pax	<b>Date: September 17-20, 2024</b>			
			60 guaranteed pax	Check in: Sept. 17, 2024 / 12:00 PM		
				Check out: Sept. 17, 2024 / 12:00 PM		
			<b>Approved Budget Cost: Php 525,000.00</b>			
			<b>Room sharing:</b> Triple Sharing with Individual Bed per Pax and Free Toiletries (Air-conditioned Room)			
			<b>Number of Pax: 138 Maximum</b>			
			<b>Guaranteed number of pax: 118 guaranteed.</b> <b><u>If the total number of the participants exceeds the guaranteed participants, the agency will be billed for the actual number but not more than the maximum no. of participants</u></b>			
			<b>Meal schedule</b>			
			July 16 and Sept. 17: Lunch, PM snack, Dinner			
			July 17-18 and Sept. 18-19- Breakfast, AM snack, Lunch, PM snack, and Dinner			
			July 19 and Sept. 20- Breakfast, AM snack,			
			***page 1 of 2***			
			<b>TOTAL APPROVED BUDGET FOR THE CONTRACT:</b>			
			One Million Fifty-Five Thousand Four Hundred Pesos Only	Note: Please specify brand model/origin .		
			(Php 1,055,400.00)			

PURPOSE: Board and Lodging for the conduct of PSD CY 2024 Mid-Year and Year End Program Review and Evaluation Workshop  
PR No.: 2024-06-0595 NP-LOV

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.**



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			Type & Time of serving:			
			Managed Buffet for Breakfast (6:00 am), Lunch (12:00 nn) and Dinner (6:00 pm)			
			Plated Snacks (AM Snack -10:00 am and PM Snack 3:00 pm)			
			Meal Selection:			
			Hotel to submit Menu (Minimum of 2 viands, 1 Soup, 1 Dessert. Rice and Beverages)			
			No repeating meal per menu			
			Schedule of use of Air-conditioned function room- (can accommodate more than 70 pax, Free of noise which is detrimental to the activity			
			July 16 / Sept. 17, 2024 -12:00 NN - 8:00 PM			
			July 17-18 / Sept. 18-19, 2024 - 6:00 AM - 8:00 PM			
			July 19 / Sept. 20, 2024- 6:00 AM - 12:00 PM			
			INCLUSIONS:			
			Free flowing coffee, tea and drinking water			
			No obstructing pillars in the conference room			
			Availability of electric outlets and free use of extension cords			
			With audio system with at least 3 microphones (wireless)			
			Free use of projector, screen, and whiteboards (1 Projector)			
			With free strong Wi-Fi connections			
			Free use of parking Space for secretariat and participants			
			Facilities must be PWD and Senior Citizen Friendly			
			Must be structurally sound, have fire escapes and firefighting equipment and CCTVs			
			Food to be served should have vegetables and fruits and can adjust for participants with medical conditions, Muslim and non-pork eaters.			
			Free Complimentary Room for the Secretariat/Regional Director (1 room) for the duration of event			
			Free Stage backdrop and welcome tarpaulin			
			Free use of facilities and amenities (team building facilities, pool, gym, etc)			
			***page 2 of 2***			
			***nothing follows***			
			TOTAL APPROVED BUDGET FOR THE CONTRACT: One Million Fifty-Five Thousand Four Hundred Pesos Only (Php 1,055,400.00)	Note: Please specify brand model/origin .		

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