



DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region

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

REQUEST FOR QUOTATION

RFQ No.: 2024-08-0778 NP-LOV

Date: August 20, 2024

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.

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.

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: maaluz@dswd.gov.ph not later than 5:00 PM on August 27, 2024 (Tuesday). Quotations submitted to different email address(es) as stated above shall not be considered for evaluation.

Very truly yours, HARVY B. CALABIO 8/20/24 Administrative Officer V Procurement Section Head

Terms and Conditions:

- 1. Award shall be made on per: [] item basis [x] total quoted price [] lot basis
2. Price Validity shall be valid until: One Hundred Twenty (120) Calendar days
3. Services shall be delivered on: September 17-20, 2024
4. Place of Delivery: Hotel within NCR/CALABARZON
5. Terms of Payment: within 15-30 days upon final inspection and acceptance
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.
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"

Mark Anthony A. Luz Procurement Officer
Telefax: 5328-5111 to 07 loc. 24052

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

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Date: (should be filled up by supplier)

MOP: NP-LOV

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

Table with columns: Item No., Qty., Unit, Bidder's Specifications, Unit Cost, Total Cost. Row 1: Board and Lodging for 3 days (50 pax). Includes details on activity, venue, dates, and room arrangements.

APPROVED BUDGET FOR THE CONTRACT:
Three Hundred Seventy Five Thousand Pesos Only
(Php 375,000.00)

PAGE 1 OF 2

Note: Please specify brand model/origin.

PURPOSE: Board and lodging for the conduct of 2024 PREW of PPD on September 17-20, 2024

PR No.: 2024-08-0778

VAT
Non-VAT

(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

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Date: _____ (should be filled up by supplier)

MOP: NP-LOV

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
			4. Menu should be feasible for religion and health concerns.		
			5. With fruits		
			6. No cream dory		
			Inclusions:		
			1. Room occupancy should follow IATF guidelines and protocols.		
			2. Structurally sound and safety for occupancy with enough fire escapes, fire fighting equipments, CCTV, elevators and stairs.		
			3. Facilities must be PWD and Senior Citizen Friendly.		
			4. Airconditioned venue with air humidifiers		
			5. No obstructing pillars in the conference room		
			6. The session hall/conference room is free from noise w/c is detrimental to the event/meeting		
			7. With registration area		
			8. Free use of telephone line, projector w/ screen, speaker podium, sound system w/ 5 microphones, electric outlets, extension cords, whiteboard and whiteboard marker & eraser and other amenities		
			9. Free Wi-Fi access for both guest and function rooms		
			10. Free use of parking space		
			11. Venue must be with provision of alcohol and sanitizers for the participants.		
			12. At least one (1) hotel staff/attendant available at any given time during the session to assist the secretariat in logistical concerns.		
			13. At least one (1) hotel staff/attendant to act as marshall to remind the hotel health protocols		
			14. Free complimentary room for the Regional Director		
			OTHERS		
			*With available emergency first aid kit and vehicle for emergency.		
			*Atleast 1 operational Elevator available 24/7		
			*Free welcome streamer		
			*With functional CCTV (24/7)		
			*Adequate security service (24/7)		
			*Not situated beside/near establishment that may touch on cultural sensitivities like mortuaries, morgue and other similar class within 50-100 meters away from the venue.		
			*Not offering short-term lodging associated with motels or situated within "RED LIGHT DISTRICT" within 50-100 meters away from the venue.		
			*Hotel has Certificate of Authority to Operate issued by the Department of Tourism		
			Note: End-user shall inform the Service Provider one to two weeks the exact date prior to the conduct of the activity		
			Note: The secretariat will provide the final list of participants in the first day of activity		
			Nothing follows		
			APPROVED BUDGET FOR THE CONTRACT: Three Hundred Seventy Five Thousand Pesos Only (Php 375,000.00)		
			Note: Please specify brand model/origin.		

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 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.