

## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office MiMaRoPa Region

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

## REQUEST FOR QUOTATION

		RFQ No. KC-2024-09-0112 Date: September 30, 2024
Company Name	¥)	
Company Address	7	
Contact Person	2	<del></del> :
Contact No.	<u>-</u>	<del></del> :
Email Address	1	
Company TIN	· · · · · · · · · · · · · · · · · · ·	
PhilGEPS Reg. No.	# # # # # # # # # # # # # # # # # # #	
TimoLi o Neg. No.	-	
Sir/Madam:		
expenses for the goo	ods listed in Annex A. Failure to it	y charges, VAT or <b>other applicable taxes</b> , and other incidental <b>ndicate information could be basis for non -compliance</b> . Also, tures and/or samples, if applicable.
	manufacturer, distributor, or agent i arized certification to this effect.	n the Philippines for goods listed in Annex A, please attach in your
PhilGEPS Certificate Statement in accorduly notarized Omnii	te, latest Income/Business Tax R dance with the attached format r bus Sworn Statement (if previously	Business Permit, Mayor's Permit , PCAB License (if applicable), Return and a notarized or unnotarized Omnibus Sworn marked as Annex B. If awarded , please submit immediately the submitted is unnotarized. The Certificate of Platinum susiness Permit and PHILGEPS Registration Number.
Floor 1680 F.T. Ben on October 4, 2024	itez corner Malvar Sts., Malate, Ma (Friday). Quotations submitted to se indicate in the subject of your en	Annex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd mila or email to: rcviceno@dswd.gov.ph not later than 5:00 PM different email addresses as stated above shall not be considered hail the title of the Project using this format: [RFQ Number],
		Very truly yours,
Terms and Conditi	ione:	HARVY B. CALABIO  Administrative Officer V CAM  Procurement Section Head
Award shall be		X total quoted price lot basis
2. Price Validity s	shall be valid until: One Hundred	Twenty (120) Calendar days
	be delivered on: December 5-6, 2	
Place of Delive     Terms of Pavr	ery: With in Puerto Princesa Pa ment: within 30 days upon final i	nspection and acceptance
Payment throu	igh LDDAP-ADA (List of Due and	Demandable Accounts Payable- Advice to Debit Account)
Account Nam Bank Name:	ie:	Account Number : Branch:
**Note: Non L	and Bank of the Philippines acc	ounts shall be charged a service fee
6. Liquidated Dar	mages/Penalty: In case of fail	lure to make full delivery within the time specified above, e at least equal to one-tenth of one percent (0.001) of the cost of
the unperform	ned portion for every day of dela	y shall be imposed. Once the cumulative amount of liquidated tount of contract, the Procuring Entity may rescind or terminate
the contract v	without prejudice to other course	es of action and remedies available under the circumstances.
	ase indicate brand, model and cour crepancy between unit cost and total	
9. Please indicat	te warranty:	
		tered at the Philippine Government Electronic Procurement Syst EPS website at www. philgeps.gov.ph to register "
	SELLC. VICENO	
	sukement Officer 36-8106 to 07 loc. 24052	Signature Over Printed Name
	umber: 0961-685-3550	( Supplier)

## 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 Procurement System (PHILGEPS). You may visit the PHILGEPS website at www.philgeps.gov.ph to register

RFQ No.: KC-2024-09-0112

Date:	( should be filled up by suppplier)
Date.	I supply be used no by supposer)

MOP: SHOPPING F	R NON-CONSULTING	SERVICES

Company Name	. #
Company Address	7
Contact Person	
Contact No.	
Email Address	
Company TIN	
PhilGEPS Reg. No.	

em No. Qty. Unit		Unit	PARTICULARS	Please fill out the specifications in the space provided)  NOTE: Supplier must state here alther the statement of compliance either "COMPLY" or "MOT COMPLY"." "Fallmre to indicate information could behals for one-compliance."	Unit Cost	Total Cost
1	231	pax (Maximum)	Board and Lodging on Conduct of Year-End Review of SWAD Programs and Implementation			
			Venue: Puerto Princesa City Palawan			
			Guaranted Pax: 208			
			(If the total pax exceeds the guaranted number of pax, the agency will be billed based on the actual number of pax, but shall not exceed to the maximum pax)			
			Check-in Date and Time: Dcember 5, 2024; 12:00 nn			
			Check Out Date and Time: December 6, 2024 : 12:00 NN			
			Room Sharing: Air Conditioned Room, Triple Sharing with individual bed per pax and free toiletries (with IATF and DOT Guidelines for the Minimum Health Standard)			
			Most Schodule:			
_			Meal Schedule: December 5, 2024 : Lunch, PM Snacks and Dinner			
_			December 6, 2024 : Eunch, PW Snacks and Dinner  December 6, 2024 : Breakfast, AM Snacks			
			December 0, 2024 , Diedardst, Alvi Shacks			
_			Type of Food Serving:			
_						
			Manage Buffet: for breakfast (6:00am), Lunch (12:00 nn) and Dinner (6:00 pm)			
			2. Hot Meal for AM Snack (9:00 am) and PM Snack (3:00 pm)		1711	
			Menu Selection:			
			Hotel to submit menu (minimum atleast 3 viands, soup, fruits, beverages)			
			Hotel wil submit proposed menu of the day (1 week before the conduct of activity)			
		L	3. No repeating of Meal Per Menu			
			<ol> <li>Food to be serve should have vegetables, fruits and can adjust for Non pork eaters (Halal)</li> </ol>			
_	-		la-dual-sa-			
_			Inclusion:  1.Free use of Airconditioned Conference Room. Can accommodate more than			
			231 pax and free from noise which is detrimental to the event.			
_	-		No obstructing pillars in the conference room.			
	-		Availability of electric outlets and free use of extension cords     With audio system and at least 4 microphones.			
-			Free use of projector and whiteboards.			
-		-	Free use of projector and writeboards:     Free use of reliable and uninterruptible wifi connection.			
			7. Free use of parking space			
		===	Free flowing coffee and drinking water			
			9. Facilities must be PWD and Senior Citizen Friendly			
			10.Must be structurally sound, have fire escapes and firefighting equipments and CCTV		á l	
			11. Free Tarpaulins/Backdrops (1-inside & 1-outside of conference hall)			
			<ol> <li>Free use of facilities and amenities (if applicable) and with at least 3 standby attendants</li> </ol>			
			NOTE: Hotel/Restaurants/Resorts should not be offering short term lodging associated with motel and should not be situated beside or across gambling establishment shops, night clubs, funeral parlors, mortuaries and other similar alike			
			***Page 1 of 1***			
			TOTAL APPROVED BUDGET FOR THE CONTRACT Five Hundred Fifty-Four Thousand Four Hundred Pesos Only (Php554,400.00)			

PURPOSE: Board and Lodging for the Conduct of Year-End Review od SWAD Program and Implementation in Palawan

PR No.: KC-2024-09-0113

(Signature over Printed name)	VAT Non-VA
(signature over Printed name)	



provider.

## REQUEST FOR QUOTATION RECEIVING FORM

I Hereby certify that I			
			has received the Request for
Quotation RFQ No.	KC-2024-09-0112	from DSWD MIMAROP	A Region intended for the
Board and Lodging fo	or the Conduct of Year-E	nd Review od SWAD Progra	m and Implementation in Palawan
Certified by:			
(Signature Over Printe Contact:	d Name of Supplier)		
Email Address:	Ÿ		
RFQ Delivered by:			
(Signature Over Printe	ed Name of Canvasser)		
Date / Time of Deliver	y:		

Note: This form shall be used and issued in cases when RFQ is personally delivered to prospective supplier/service