

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office MiMaRoPa Region 1680 F.T. Benitez corner Malvar Sts., Malate, Manila

REQUEST FOR QUOTATION

| | | RFQ No.: Date: | 2024-08-0876 NP-LOV September 12, 2024 |
|--|--|--|---|
| | | | |
| Company Name | <u></u> | _ | |
| Company Address | | | |
| Contact Person | Th. | _ | |
| Contact No. | 4 | == | |
| Email Address | 7 | - | |
| | | - | |
| AND AND PERSONAL PROPERTY. | pany Name pany Address act Person act No. II Address pany TIN active Sep No. Addam: se quote your government price/s including delivery charges, VAT or other applicable taxes, and oftenses for the goods listed in Annex A. Failure to indicate information could be basis for non-consh us with descriptive brochures, catalogues, literatures and/or samples, if applicable. u are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. pleas ation a duly notarized certification to this effect. titionally, please attach copies of your Company's Business Permit, Mayor's Permit, PCAB Licens GEPS Certificate, latest Income/Business Tax Return and a notarized or unnotarized Omnibus coordance with the attached format marked as Annex B. If awarded, please submit immediately thious Swom Statement (if previously submitted is unnotarized. The Certificate of Platinum Member initied in lieu of the Mayor's /Business Permit and PHILGEPS Registration Number. see accomplish and submit this form together with Annex A to DSWD MIMAROPA Region-BAC Secro F.T. Benitez corner Malvar Sts., Malate, Manila or email to: mastruz@dswd.gov.ph not later than g. permet. The certificate of Platinum Member in the subject of your email the title of the Project using this for read of the valuation. Please indicate in the subject of your email the title of the Project using this for leadline of Submission] Wery truly/yours, Within 15-30 days upon final inspection and acceptance Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable. Advice to Debit Account Number: Branch: "Yote: 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 aborthe amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the manumount of the proper of the proper of the pr | | |
| ontact Person ontact No. mail Address ompany TIN hilGEPS Reg. No. ir/Madam: lease quote your government price/s including delivery charges, VAT or other applicable taxes, a xpenses for the goods listed in Annex A. Failure to indicate information could be basis for nor unish us with descriptive brochures, catalogues, literatures and/or samples, if applicable. you are exclusive manufacturer, distributor, or agent in the Philippines for goods listed in Annex A. uotation a duly notarized certification to this effect additionally, please attach copies of your Company's Business Permit, Mayor's Permit , PCAB LithilGEPS Certificate, latest Income/Business Tax Return and a notarized or unnotarized orn accordance with the attached format marked as Annex B. If awarded , please submit immedia ornibus Sworn Statement (if previously submitted is unnotarized. The Certificate of Platinum Me ubmitted 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 680 F.T. Benitez corner Malvar Sts., Malate, Manila or email to: maaluz@dswd.gov.ph not later terptember (1, 2024 (Thursday). Quotations submitted to different email address(es) as stated aborosidered for evaluation. Please indicate in the subject of your email the title of the Project using the IDP of the project using the IDP of Submission). Very truly you have the project of your email to the title of the Project using the IDP of Submission. | | | |
| Sir/Madam: | | | |
| expenses for the goo | ds listed in Annex A. Failure to indic | cate information could be | basis for non -compliance. Also, |
| If you are exclusive n quotation a duly nota | nanufacturer, distributor, or agent in the arized certification to this effect | ne Philippines for goods list | ted in Annex A, please attach in your |
| PhilGEPS Certificat in accordance with Omnibus Sworn Stat | e, latest Income/Business Tax Retu the attached format marked as Ann ement (if previously submitted is unno | rn and a notarized or unit lex B. If awarded, please starized. The Certificate of | notarized Omnibus Sworn Statement submit immediately the duly notarized if Platinum Membership maybe |
| 1680 F.T. Benitez co September 12, 2024 considered for evalu | rner Malvar Sts., Malate, Manila <u>or en</u> I (Thursday). Quotations submitted to ation. Please indicate in the subject of | nail to: maaluz@dswd.go different email address(es | by.ph not later than 5:00 PM on s) as stated above shall not be Project using this format: [RFQ Number RFQ |
| Terms and Condition | ons: | Ad | ministrative Officer V |
| 1. Award shall be | nade on per: Titem basis (| x total quoted price | lot basis |
| | | (120) Calendar days | 12 |
| Services shall b | e delivered on November 6-8, 2024 | 1127 | |
| | y: / Hotel within NCR | | |
| Annual Management of the Contract of the Contr | | | duice to Debit Accounts |
| | 5 5/ | | |
| | S-20- | | |
| **Note: Non La | nd Bank of the Philippines accounts s | hall be charged a service fe | e |
| Liquidated Dam | ages/Penalty In case of failure to | make full delivery within t | he time specified above, |
| the amount of | the liquidated damages shall be at leas | st equal to one-tenth of one | percent (0.001) of the cost of |
| the unperform | ag portion for every day of delay shall t | contract, the Procuring En | tity may rescind or terminate |
| the contract w | thout prejudice to other courses of ac- | tion and remedies available | under the circumstances. |
| | | | |
| | | | |
| 9. Please indicate | walranty: | | |
| 10. NOTE "Pro | specifice supplier must be registered at the GEPS). You may visit the PhilGEPS websit | Philippine Government Elect te at www. philgeps.gov.ph to | register" |
| | | | |
| -7-18-90-00 | urement Officer | | Signature Over Printed Name |
| | 8-5111 to 07 loc. 24052 | | (Supplier) |

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

Note. Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PHILGEPS). You may

| RFQ No.: | 2024-08-0876 |
|---------------------------|--------------|
| 0.000.000.000.000.000.000 | |

| Date: | (should be | filled up | Dy | supp |
|-------|-------------|-----------|----|------|

| | CONTRACT OF | HILGERS | website at www.philgeps.gov.ph to register | Date: | (should be filled up by supplier) | |
|---------|-------------------|---------|--|--|-------------------------------------|------|
| 779 | y Name | 314 | | MOP: NP-LOV | | |
| | y Addre Person | 55 | | | | |
| act | | | | | | |
| | ddress | | 1 | | | |
| | y TIN | | | | | |
| SEP | S Reg. | No: | | Bidder's Specifications | | - |
| m o. | Qty. | Unit | | (Please fill out the specifications in the space provided) NOTE: Supplier must state here either the statement of compliance either "COMPLY" of "NOT COMPLY". Fallure to indicate information could be basis for non-compliance" | Unit Cost Total | Cost |
| | 30 | pax | Board and Lodging for 2 days | 1 | | |
| | | | Activity: Cascading of Social Protection Plan FY 2023-2024 cum Data Management | | | |
| | | | Preferred Venue: Hotel within NCR | | | |
| | | | Date of Activity: November 6-8, 2024 | | | |
| | | | Check In Date and Time: November 6, 2024 ; 12:00 pm Check Out Date and Time: November 8, 2024; 12:00 pm | | | |
| | | | Number of pax: 30 maximum | | | |
| | | V | Guaranteed number of pax: 25 guaranteed pax NOTE: 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 | | | |
| | | | Functionality of Function Room: | | | |
| | | 1 | Available Air-conditioned Function/Conference Room that can accommodate 30 participants from 7am to 6pm with space for workshop and secretariat table | | | |
| _ | - | - | Set-up to be finalized to training secretariat | | | |
| - | _ | - | With free pads and pencils | | | |
| | | 1 | 4. With Philippine Flag, Podium and Pole | | | |
| | | / | 5 Waive electricity charges for use of laptops | | | |
| | | / | 6 Soundproof conference room. | | | _ |
| | | | Room Arrangement: | | | _ |
| | | V | Guaranteed twin/triple sharing air-conditioned room, 1 bed per participants | | | |
| | | / | Open check out time for complimentary room on the last day without additional cost. Amenities includes | | | _ |
| | | - | TV and Cabinets To Tietries/pax (towels, shampoo, soap, toothbrush, slippers) to be replenished everyday. | | | |
| | | | Meals Schedule | | | |
| | | 1 | November 6, 2024- Lunch, PM Snack and Dinner | | | _ |
| | | 1 | November 7, 2024- Breakfast, AM Snack, Lunch, PM Snack Dinner | | | _ |
| | | V | November 8, 2024-Breakfast and AM Snack | | | _ |
| | | V | Type of Serving: Managed Buffet-Breakfast (6:00am), Lunch (12:00nn) and Diriner (6:00pm) Plated Snacks-AM Snacks (9:00 am) and PM Snacks (3:00 pm) | | | |
| | 1 | | Menu Selection: | | | |
| | | V | | | | |
| Ī | | V | 2. Hotel will submit proposed menu one week before the schedule | | | |
| | | 1 | 3. No repeating menu/meals | | | _ |
| - | _ | - | | | | |
| | | | APPROVED BUDGET FOR THE CONTRACT: |) | | |
| - | - | | One Hundred Ninety Two Thousand Pesos Only (Php 192,000,00) | | | |
| | | | | Note: Please specify brand model/origin. | | - |
| _ | | | PAGE 1 OF 2 | gm | | |

ment Form No. 04-A (Annex A)

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

DSWD MIMAROPA REGION Field Office MiMaRoPa Region 1680 F.T. Benitez corner Malvar Sts., Malato, 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.: 2024-08-0876 should be filled up by supplier Date: Company Name MOP: NP-LOV Company Address Contact Person Contact No. Email Address Company TIN PhilGEPS Reg. No. Bidder's Specifications
(Please fill out the specifications in the
space provided)
NOTE: Supplier must state here either the
statement of compliance either "COMPLY"
FollowDEY", Follow to indicate
information could be basis for noncompliance." Item Unit Cost Total Cost Qty Unit compliance* 4. Menu should be feasible for religion and health concerns. V 5. With fruits 6. No cream dory Inclusions: Room occupancy should follow IATF guidelines and protocols 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 half/conference room is free from noise w/c is detrimental to the event/meeting 1 7 With registration area 8. Free use of telephone line, projector w/ screen, speaker podium, sound system w/ 5 crophones, 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: One Hundred Ninety Two Thousand Pesos Only (Php 192,000.00) Note: Please specify brand model/origin. PAGE 2 OF 2 Board and lodging for the conduct of Cascading of Social Protection Plan FY 2023-2024 cum Data Management on November 6-8, 2024 VAT Non-VAT PR No.: 2024-08-0876

(Signature over printed name)