

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

## REQUEST FOR QUOTATION

			2024-10-1009 NP-LOV
		Date:	October 17, 2024
Company Name	3		
Company Address			
Contact Person	g.		
Contact No.	#		
Emai #	9		
Company TIN	ā		
PhilGEPS Reg. No.	3		
Sir/Madam:			
goods listed in Annex	ernment price/s including delivery charges, VAT or other ap  A. Failure to indicate information could be basis for literatures and/or samples, if applicable.		
If you are exclusive maduly notarized certificat	anufacturer, distributor, or agent in the Philippines for goods ion to this effect.	s listed in Annex	A, please attach in your quotation a
Certificate, latest Inco	ach copies of your Company's Business Permit, Mayor's ome/Business Tax Return and a notarized or unnotarized marked as Annex B. If awarded, please submit immedia unnotarized. The Certificate of Platinum Membership materials of Number.	ed Omnibus Sv tely the duly no	vorn Statement in accordance with tarized Omnibus Sworn Statement (if
Benitez corner Malvar (Thursday). Quotation	I submit this form together with Annex A to DSWD MIMARO Sts., Malate, Manila or email to: ccrvictorio@dswd.go is submitted to different email address(es) as stated above smail the title of the Project using this format: [RFQ Number]	v.ph not later the shall not be considered.  [] [Deadline of state   HA   Adam   Adam	han 5:00 PM on October 24, 2024 sidered for evaluation. Please indicate Submission!  Very truly yours,  RVY E CALABIO inistrative Officer V
Terms and Condition	s:	Procu	rement Section Head
Award shall be m     Price Validity sha	ade on per: item basis X tota ill be valid until: One Hundred Twenty (120) Calendar day	quoted price	lot basis
Services shall be     Place of Delivery	delivered on: November 29-30, 2024		
5. Terms of Payme	nt: within 30 days upon final inspection and acceptance		
Payment through Account Name:	LDDAP-ADA (List of Due and Demandable Accounts Pa		o Debit Account)
Bank Name:	Bra	inch:	
**Note: Non Lar. 6. Liquidated Dama	d Bank of the Philippines accounts shall be charged a sign sign sign sign sign sign sign sign		specified above
the amount of t	he liquidated damages shall be at least equal to one-ten	th of one perce	nt (0.001) of the cost of
the unperforme	d portion for every day of delay shall be imposed. Once es ten percent (10%) of the amount of contract, the Proc	the cumulative	amount of liquidated
the contract wit	hout prejudice to other courses of action and remedies	available under	the circumstances.
	e indicate brand, model and country of origin. pancy between unit cost and total cost, unit cost shall prevai		
9. Please indicate v	varranty:		
10. NOTE: "Pros (Philo	ective supplier must be registered at the Philippine Gov FPS). You may visit the PhilGEPS website at www. philg	ernment Electr eps.gov.ph to r	onic Procurement System egister "
CATHERINE	ATHY R. VICTORIO		
	rement Officer		Objective Over Bulgery Mented
Telefax: 5336-8106 Contact Number: (			Signature Over Printed Name (Supplier)



Contact No. Email Address Company TIN

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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

Date: (should be filled up by suppplier)

Company Name : MOP: NP-LOV

Company Address : Contact Person :

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 compilance either "COMPLY or "NOT COMPLY". "Failure to indicate information could be basis for non-compliance."	Unit Cost	Total Cost
1	80	pax	Board and Lodging for 1 day			
70 gu	arantee	d pax	Year-end Review of SWAD Programs and Implementation			
	1		Venue: Boac, Marinduque			
/			Date: November 29-30, 2024			
			Check in: November 29, 2024 / 12:00 PM			
			Check out: November 30, 2024 / 12:00 NN			
			Room sharing: Airconditioned room, Triple sharing with separate bed per pax and free toiletries			
			Number of Pax: 80 Maximum			
		V	Guaranteed number of pax: 70 guaranteed.  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			
			Meal schedule			
		1	Nov 29: Lunch, PM snack, Dinner			
		/	Nov 30: Breakfast, AM snack			
_						
_			Type & Time of serving: Managed Buffet Meals & Plated Snacks  Breakfast - 6:00 AM AM snack - 9:00 AM			
	-	-			-	
	-		Lunch - 12:00 NN PM snack - 3:00 PM			
			Dinner - 6:00 PM			
			Menu selection:			
			Hotel to submit the Menu (minimum of atleast 2 viands, soup, dessert and beverages)			
			No repeating menu/meals			
			Inclusions:			
	-	THE STREET	Free use of Airconditioned Conference Room (can accommodate more			
		0.00	than 120 pax and free from noise which is detrimental to the event			
		-	Compliance of function room to a health and safety protocols of social distancing			
			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 and at least 4 microphones			
		-	Free use of LCD projector and whiteboards			
	7	-	With free strong wifi connections			
			Free use of parking space			
	1		Facilities must be PWD and Senior Citizen Friendly			
			Must be structurally sound, have fire escapes and firefighting equipments and CCTV Food to be served should have vegetables and fruits and can			
		7-	adjust for Muslim and non			
			pork eaters			
			Free Tarpaulin/Backdrop			
	1		Free use of facilities and amenities (if applicable)			
		-	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 like			
			***nothing follows***		-	-
			TOTAL APPROVED BUDGET FOR THE CONTRACT:	Note: Please specify		
			One Hundred Seventy-Six Thousand Pesos Only	brand model/origin .		
			(Php 176,000.00)		-	

PURPOSE: Year-end Review of SWAD Programs and Implementation

PR No.: 2024-10-1009 NP-LOV

VAT
Non-VAT

(Signature over Printed name) Supplier