

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

REQUEST FOR QUOTATION

		RFQ No. 2024-11-1043
		Date: November 14, 2024
Company Name	V	
Company Address	¥,	
Contact Person	Ж	
Contact No.	7	
Email Address	9	
Company TIN	· v	
PhilGEPS Reg. No.	1	
Sir/Madam:		
or are decad ligited it.	vernment price/s including de Annex A. <u>Fallure to Indica</u> catalogues, literatures and/o	plivery charges, VAT or other applicable taxes, and other incidental expenses ate information could be basis for non -compliance. Also, furnish us with or samples, if applicable.
Format marked as Ar submitted is unnotarize PHILGEPS Registration Please accomplish and T. T. Benitez corner Ma 21 November, 2024 (*)	nnex B. If awarded , please : ed. The Certificate of Platii on Number: d submit this form together walver Sts., Malate, Manila or Thursday). Quotations subm	by's Business Permit, Mayor's Permit, PhilGEPS Certificate, latest or unnotarized Omnibus Sworn Statement in accordance with the attached submit immediately the duly notarized Omnibus Sworn Statement (if previously num Membership maybe submitted in lieu of the Mayor's /Business Permit and with Annex A to DSWD MIMAROPA Region -BAC Secretariat at 2nd Floor 1680 email to: procurement.fomimaropa@dswd.gov.ph not later than 5:00 AM of nitted to the different email address(es) as stated above shall not be considered
Submission].	naicate in the subject of you	remail the title of the Project using this format: [RFQ Number], [Deadline of Very truly yours,
		HARVY B. CALABIO Administrative Officer V Procurement Section Head 1 4 NOV 20
erms and Condition		- Frodreshen Bedadi Head
Award shall be m Price Validity sha	Il be valid until: One Hundre	ed Twenty (120) Calendar days
Services shall be Place of Delivery	delivered on: 15 CD after	
5. Terms of Paymer	nt. within 30 days upon fir	nter, Bansud, Oriental Mindoro nal inspection and acceptance
Payment through Account Name:	LDDAP-ADA (List of Due a	and Demandable Accounts Payable- Advice to Debit Account)
Bank Name:		Account Number :Branch:
the amount of the the unperformed	ges/Penalty: In case on the liquidated damages shat portion for every day of the income of the case of the liquid income of the case o	accounts shall be charged a service fee If failure to make full delivery within the time specified above, If be at least equal to one-tenth of one percent (0.001) of the cost of delay shall be imposed. Once the cumulative amount of liquidated
uamages reache	es ten percent (10%) of the	amount of contract, the Procuring Entity may rescind or terminate urses of action and remedies available under the circumstances.
 For goods please 	indicate brand, model and o	country of origin. total cost, unit cost shall prevail.
Please indicate w	arranty:	
10. NOTE: "Prosp	ective supplier must be re-	gistered at the Philippine Government Electronic Procurement System IGEPS website at www. philgeps.gov.ph to register "
		The second secon
Telefax: 5328-5111	ment Officer to 51115 loc. 24052	Clamburg Over Bridge 4 No
Contact Number: 0		Signature Over Printed Name (Supplier)

VAT Non-VAT

(Signature over Printed name) Supplier



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Electronic Procurement System (PHILGEPS). You may visit the PHILGEPS website at www.philgeps.gov.ph to register Company Name			i to register	RFQ 2024-11-1043 Date:			
			1				
ompan	y Address	15		MOP: NP- SVP			
ontact	Person						
ontact	No.		1				
mail Ac	dress						
ompan	y TIN						
hilGEP	S Reg. No	0					
Item				Bidder's Specifications (Please fill out the specifications in the space provided)			
No.	Qty.	Unit	PARTICULARS	NOTE: Supplier must state here either the statement of compliance either "COMPLY". "Failure to indicate information could be basis for non-compliance." (PLEASE STATE	Unit Cost	Total Cost	
			SUPPLY AND DELIVERY OF KITCHEN EQUIPMENT FOR MIMAROPA YOUTH CENTER	THE BRAND BEING OFFERED)			
1	1	UNIT	6 BURNER GAS STOVE FLOOR STANDING WITH BOTTOM CABINET WITH EXHAUST FAN				
			SPECIFICATIONS:				
			HEAVY DUTY 6 RANGE GAS BURNER WITH ITS OWN TEMPERATURE CONTROL FOR EACH BURNER				
			HIGH PERFORMANCE AND BACKED UP BY A ONE YEAR WARRANTY				
_			GAS; LPG				
-			SIZE: L1200 X W900 X H920 MM				
-			LPG2800-3700Pa: 3.34/2.40 kg/h				
			NG2000-2500Pa: 4.66/3.49 m3h				
		-	Power Supply : 7.5 x 3 + 4.5 x 3 Kw				
2	1	unit	BAIN MARIE GLASS COVERED STAINLESS STEEL ELECTRIC FOOD HEATING				
-			MULTI-COMPARTMENT FOOD TABLE Specifications:				
			5 Compartment with 1 /1 Basinx 2 boxes				
-			Size: 53x 32x 15cm 1/2 basin x 4 boxes				
			Size: 32.5 x 26.5 x 15cm				
			Thickened Stainless Body				
3	1	UNIT	STAINLESS STEEL KITCHEN SINK WITH 3 COMPARTMENT STAINLESS WITH DRAINBOARDS				
			Size: 500 x 500 x 280 mm				
			Dimension : 2000 x 700 x(850 +100) mm				
			APPROVED BUDGET FOR THE CONTRACT: PHP 220,000.00				
			TWO HUNDRED TWENTY THOUSAND PESOS ONLY				

Omnibus Sworn Statement (Revised) [shall be submitted with the Bid]

	PUBLIC OF THE PHILIPPINES) TY/MUNICIPALITY OF) S.S.
V 1.1	AFFIDAVIT
4.5	
l, INI-	of legal age, [Civil Status],
[14c	ationality] and residing at a state that:
law	, do hereby depose and state that:
1.	I am the sole proprietor or authorized representative of
	with office address at
2.	As the owner and sole proprietor, or authorized representative of, I have full power and authority to do, execute and
	perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract
	for of the DSWD Field Office MIMAROPA, as shown in the attached duly notarized Special Power of Attorney;
3.	(Name of Supplier) is not "blacklisted" or barred
	from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board, by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting:
4.	Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
5.	(Name of Supplier) is authorizing the Head
	of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;
6.	The owner or sole proprietor is not related
•	to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC) the Technical Working Group, and the BAC Secretariat, the head of the Project
	Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;
7.	(Name of Supplier)complies with existing labor
	laws and standards; and
8.	(Name of Bidder) is aware of and has
	(Name of Bidder) is aware of and has undertaken the responsibilities as a Bidder in compliance with the Philippine Bidding Documents, which includes:
	a. Carefully examining all of the Bidding Documents;

	, local or otherwise, affecting the implementation of the		
	, local of otherwise, affecting the implementation of the		
esumate of the fac	cilities available and needed for the contract to be bid, if		
any; and Inquiring or securing Supplemental/Bid Bulletin(s) issued for the Name of the Project			
	(Name of Supplier) did not give or pay directly or		
commission, amor	unt, fee, or any form of consideration, pecuniary or		
minal liability for S s or abuse of confi ived by a person goods or services ines pursuant to A enal Code.	nade or given, failure to perform or deliver any of the in the contract shall be sufficient grounds to Swindling (Estafa) or the commission of fraud with idence through misappropriating or converting any or entity under an obligation involving the duty to s, to the prejudice of the public and the government article 315 of Act No. 3815 s. 1930, as amended, or		
EREOF, I have healippines.	ereunto set my hand this day of, 20 at		
	[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE] [Insert signatory's legal capacity] Affiant		



REQUEST FOR QUOTATION (RFQ) RECEIVING FORM

I hereby certify that I	, of
Quotation (RFQ No) from DSWD MIMAROPA Region intended
for	
Certified by:	
(Signature Over Printed Name of Supplier) Contact No:	
Email Address:	
RFQ Delivered by:	
(Signature Over Printed Name of Canvasse	
Date /Time of Delivery :	
Note: This form shall be used and issued in cases whe provider.	n RFQ is personally delivered to prospective supplier/service



NOTICE

Any solicitations in any form and for any purpose using the name or acting for and on behalf of DSWD Field Office MIMAROPA is unauthorized, unlawful, and should be disregarded.

We strongly urge everyone to exercise caution and not engage with anyone claiming to represent DSWD Field Office MIMAROPA in such a manner.

To avoid misrepresentation, please only contact our authorized personnel via email or phone. You may reach us through:

Bids and Awards Committee Secretariat

DSWD Field Office MIMAROPA

1680 F.T. Benitez corner Malvar Streets, Malate, Manila Trunk Line Number: (02) 5328-5111 to 5115 local 24052 Email Address: procurement.fomimaropa@dswd.gov.ph

Website: http://www.fo4b.dswd.gov.ph

