

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT  
Field Office IX, Zamboanga City

REQUEST FOR QUOTATION

RFQ NO. PCDP-0014  
DATE: 9/24/20

COMPANY NAME :  
COMPANY ADDRESS :  
CONTACT PERSON :  
CONTACT NO. :  
COMPANY TIN 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. Also, furnish us with the descriptive brochures, catalogues, literatures and/or samples, if applicable.

If you are the exclusive manufacturer, distributor or agent in the Philippines for the goods listed in Annex A please attach in your quotation a duly notarized certification to this effect.

Please accomplish and submit this form together with Annex A to DSWD FO-IX on or before 9/29/2020, 5:00 PM

Very truly yours,

  
MA. CORAZON G. SUMICAD  
CAO

Terms and Conditions:

- Award shall be made on per:  Item Basis  Lot Basis
- Quotation validity shall not be less than **45** days
- Good/s shall be delivered \_\_\_\_\_
- Place of Delivery: **ZAMBOANGA CITY**
- Terms of payment: **45 DAYS AFTER ACTIVITY/DELIVERED**
- Liquidated Damages/Penalty **ONE-TENTH (1/10) OF ONE PERCENT FOR EVERY DAY DELAY SHALL BE IMPOSED.**
- Indicate brand, model and country of origin.: \_\_\_\_\_
- In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- Warranty: \_\_\_\_\_
- Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit Philgeps website at [www.philgeps.gov.ph](http://www.philgeps.gov.ph) and register for free.

  
Renato G. Fojas  
Regional Procurement Officer

(signature over printed name)

Supplier

PHILGEPS NO.: \_\_\_\_\_

PHILGEPS EXPIRY: \_\_\_\_\_

COMPANY NAME: DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT  
 COMPANY ADDRESS: GENERAL VICENTE ALVAREZ ST. ZAMBOANGA CITY  
 CONTACT PERSON:  
 CONTACT NO.:

**ANNEX A: RFQ**  
 RFQ NO.: PCDP-0014  
 DATE:

ITEM NO.	QTY.	UNIT	PURCHASER'S SPECIFICATIONS	ABC	BIDDER'S SPECIFICATIONS	UNIT COST	TOTAL COST
1		MOS.	PURCHASE OF SERVICE FOR THREE (3) HOUSEPARENTS X Php 477.41/day				
2		MOS.	PURCHASE OF SERVICE FOR ONE (1) ASST. COOK X Php 424.90/day				
			X X X X NOTHING FOLLOWS X X X X X				
			TAKE NOTE:				
			Business/Mayor's Permit shall be issued upon receipt of Purchase Order				
			Income/Business Tax Return shall be required for National Procurement under Small Value Procurement Modality with ABC above ₱ 500,000.00 after receipt of approved contract and/or during delivery/activity before payment.				
			Omnibus Sworn Statement shall be required for Negotiated Procurement under Small Value Procurement Modality with ABC above P50,000.00				

**PURPOSE:** HIRE MANPOWER FOR THE OPERATION OF THE PCDP.

**PR. NO.:**

**IMPORTANT:** The winning bidder must sign the Original copy of Purchase Order (P.O.) with in five (5) days from the date of receipt. Failure to sign the original P.O means that the bidder is not interested and will be a ground for suspension or blacklisting in DSWD's future biddings.

**RENATO G. FOJAS**  
 RPROCUREMENT OFFICER

(SIGNATURE OVER PRINTED NAME)  
 SUPPLIER

CANVASSER