

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

Super
016

REQUEST FOR QUOTATION

RFQ NO. 0646
DATE: _____

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

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 _____ on or before _____, 5:00 PM

Very truly yours,

Comissic
MA. CORAZON G. SUMICAD
CAO

SocPen-2020-12-0462
POSTED
GEPS REF No. _____
I.A.E. _____
SIGNATURE _____

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 7wd upon receipt of PO
- Place of Delivery: DSWD FO IX
- Terms of payment: 10wd after complete delivery
- Liquidated Damages/Penalty one-tenth (1/10) of one percent for every day of delay shall 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 and register for free.

Renato G. Fojas
Renato G. Fojas
Regional Procurement Officer

(signature over printed name)
Supplier

PHILGEPS NO.: _____
PHILGEPS EXPIRY: _____

COMPANY NAME:
 COMPANY ADDRESS:
 CONTACT PERSON:
 CONTACT NO.:

ANNEX A: RFQ
 RFQ NO.: 06/16
 DATE:

ITEM NO.	QTY.	UNIT	PURCHASER'S SPECIFICATIONS	ABC	BIDDER'S SPECIFICATIONS	UNIT COST	TOTAL COST
150		bill	Alcohol ethyl 70% 500ml	150.00			
100		box	Disposable face mask 3 layered 50pcs/box	100.00			
60		pcs	Face shield astro acrylic clear anti fog	60.00			
200		box	Vitamin C with zinc 100 tablets 500mg	200.00			
20		box	Disposable gloves white latex powder free medium	20.00			
10		box	Disposable gloves white latex powder free large	10.00			
			Income/Business tax return shall be required for negotiated procurement under small value procurement modality with ABC above P500,000.00 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 P500,000.00 after receipt of approved contract and/or during delivery/activity before payment				
			Business/Mayors permit shall be submitted upon receipt of Purchase Order				

PURPOSE: For Socpen
 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.

[Signature]
 RENATO G. FOJAS
 RPROCUREMENT OFFICER

CANVASSER

SocPen-2020-0412
POSTED
 GEPS REF No. _____
 DATE _____
 SIGNATURE _____

(SIGNATURE OVER PRINTED NAME)
 SUPPLIER