

**REQUEST FOR QUOTATION**

RFQ NO. 2021-730  
DATE: 4-Aug-2021

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

KALAHI-2021-08-485  
**POSTED**  
GEPS REF. NO. \_\_\_\_\_  
DATE: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_

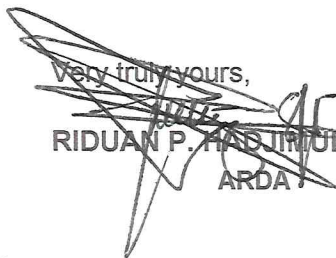
Sir/Madam:

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 **TECHNICAL SPECIFICATIONS** 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 submit this form together with Annex A to **DSWD FO IX BAC OFFICE** on or before August 9, 2021, 5:00 PM.

Department of Social Welfare and Development FO-IX  
BIDS AND AWARDS COMMITTEE  
For Posting  
Received by: Process Office  
Date & Time: 8/7/2021 2:17pm

Very truly yours,  
  
RIDUAN P. HADJIUDDIN  
ARDA

Terms and Conditions: ks: \_\_\_\_\_

**PURPOSE : TO BE USE DURING THE CONDUCT OF MINDANAO CLUSTER KALAHI-AF LAUNCHING IN PIÑAN, ZON**

**PR NUMBER : 2021-08- 880**

- 1. Award shall be made on per :     Item Basis   xx   Lot Basis
- 2. Quotation validity : 20 CALENDAR DAYS FROM BID OPENING
- 3. Delivery Period : August 13, 2021
- 4. Delivery Area : DSWD FO-9, ZC
- 5. Terms of payment : WITH IN 60 WORKING DAYS
- 6. Liquidated Damages/Penalty : 1/10 of 1% of undelivered portion x No. of days of delay
- 7. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- 8. Warranty : N/A
- 9. Performance Security : N/A

9. 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: \_\_\_\_\_

