

REQUEST FOR QUOTATION

RFQ NO. 2021-833
DATE: 2-Sep-2021

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

4PS-2021-09-579
POSTED
GEPS REF No.: _____
DATE: _____

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 September 13, 05:00 PM.

Very truly yours,

[Signature]
RIDUAN P. HADJIMUDDIN, CESO IV
ARDA

Terms and Conditions:

PURPOSE	:	COMPLEMENTARY SUPPLIES FOR PARTICIPANTS ON THE CONDUCT OF CAPABILITY BUILDING ACTIVITIES FOR CY 2021
PR NUMBER	:	2021-07-0856
1. Award shall be made on per	:	___ Item Basis ✓ Lot Basis
2. Quotation validity	:	30 CALENDAR DAYS FROM BID OPENING
3. Goods shall be delivered on	:	10 WORKING DAYS UPON RECEIPT OF NTP
4. Delivery Area	:	DSWD FO IX
5. Terms of payment	:	W/ IN 60 CALENDAR DAYS AFTER DELIVERY
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

Department of Social Welfare and Development FO IX
BIDS AND AWARDS COMMITTEE
 For Posting
[Signature]
 Received by: _____
 Date & Time: 9/10/2021 9:15am

10. 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.

[Signature]
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 : CALVIN MONDICK R. RAVAL
 CONTACT NO. : 9171097043

ANNEX A: RFQ
 RFQ NO. :
 DATE :
 2021-833
 2021-09-02

ITEM NO.	QTY.	UNIT	PURCHASER'S SPECIFICATIONS	TOTAL ABC	BIDDERS SPECIFICATIONS	UNIT COST	TOTAL COST
1	460	SET	COVID-19 HYGIENE KIT XXXXX NOTHING FOLLOWS XXXXX INCLUSIONS: 50'S SURGICAL MASK BOX SPRAY 500ML HAND SANITIZER SPRAY 50 ML ALCOHOL WET TISSUE 50'S / PACK ACRYLIC FACE SHIELD w/ pouch	184,000.00			
			Take Note:				
			Business/Mayor's Permit shall be issued upon receipt of Purchase Order				
			Income / Business Tax Return shall be required for Negotiated Procurement under Small Value Procurement Modality with ABC above P900,000.00 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 after receipt of approved contract and/or during delivery/activity before payment.				

PURPOSE : COMPLEMENTARY SUPPLIES FOR PARTICIPANTS ON THE CONDUCT OF CAPABILITY BUILDING ACTIVITIES FOR CY 2021

PR. NO. : 2021-07-0856


 RENATO S. FOJAS
 PROCUREMENT OFFICER
 CALVIN MONDICK R. RAVAL
 CANVASSER

(SIGNATURE OVER PRINTED NAME)
 SUPPLIER