



PROCUREMENT SECTION
 ADMINISTRATIVE DIVISION
 DSW FIELD OFFICE IX
 DSWD-GF REV 01 / 12 OCT. 2021

REQUEST FOR QUOTATION

RFQ NO. 986
 DATE: October 05, 2022

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

CPRF - 2022 - 0986
POSTED
 DEPS RF:
 DATE: 10/06/22
 SIGNATURE: *[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 BIDDING DROP BOX** on or before Oct. 17, 2022 5:00PM

Very truly yours,
[Signature]
RENATO G. ROJAS
 AO-V *10/6/22*

Terms and Conditions:

- PURPOSE** : Proposed Glass Partition for SDO Area at Field office Pagadian City
- PR NUMBER** : 2022-10-0986
- 1. Award shall be made on per : Item Basis Lot Basis
- 2. Quotation validity : 30 days
- 3. Delivery Period : 7 Days Upon Received of PO
- 4. Delivery Area : DSWD - SWADT-Pagadian
- 5. Term of Payment : Within 30 Calendar Days
- 6. Liquidated Damages/Penalty: one-tenth (1/10) of 1% one percent per day for undelivered/unperformed portion.
- 7. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- 8. Warranty:
- 9. Performance Security:
- 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.

Take Note:

Business/Mayor's Permit CY 2022
incom/ Business Tax return for ABCs Above P500K
Omnibus Sworn Statement for ABCs Above P50K

(signature over printed name)

Supplier

PHILGEPS NO.: _____

PHILGEPS EXPIRY: _____

