

**REQUEST FOR QUOTATION**

Section 53.9b - SVP - Goods

RFQ NO. 08-1000  
 DATE: 6-Aug-2024

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

*ADMIN-7024-08-1000*  
 Bids and Awards Committee  
**POSTED**  
 GEPS REE No.: 11127237  
 DATE: **07 AUG 2024**  
 SIGNATURE: \_\_\_\_\_

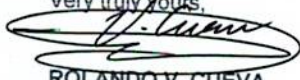
Sir/Madam:

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 12, 2024 @ 09:00 AM

Very truly yours,  
  
**ROLANDO V. CUEVA**  
 Regional Procurement Officer

Terms and Conditions:

- |  |   |  |
|--|---|--|
| <b>PURPOSE</b>   | : | Service Vehicle during the arrival of NMDC delegates in Dipolog City to Dapitan City & Within ZDN. |
| <b>PR NUMBER</b>   | : |  |
| 1. Award shall be made on per  | : | <input type="checkbox"/> Item Basis <input checked="" type="checkbox"/> Lot Basis                  |
| 2. Quotation validity  | : | 30 CALENDAR DAYS FROM BID OPENING  |
| 3. Goods shall be delivered on   | : | <b>August 13-15, 2024</b>  |
| 4. Delivery Area   | : | <b>Zamboanga Del Norte</b>   |
| 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  | : | <u>N/A</u>   |
| 9. Performance Security  | : | <u>N/A</u>   |

Please email your accomplished request for QUOTATION and ANNEX A at [bac.dswdfo9@gmail.com](mailto:bac.dswdfo9@gmail.com)

(signature over printed name)

Supplier

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



