DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Note: Prospective supplier must be registered at the Philippine Government Electronic Procurement System PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free."					RFQ No.: 24-0967-NP-SVP Date: 2 Aug 2024	
omnai	ny Name:					
	ny Name. ny Addres	· ·		_		
	Person:	.5•		_		
Contact				_		
	PS Reg. N	o.:				
	ny TIN:					
Email A	Address:			_ _		
Item No.	Qty.	Unit	Purchaser's Specifications	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
			SUPPLY AND DELIVERY OF:	provided		
	25	UNIT	OFFICE CHAIR			
			H - 33" x 21" x 17"			
			BLACK			
			*******NOTHING FOLLOWS****			
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					_	_
			Approved Budget for the Contract			
			(ABC): PhP 112,500.00			
URPO	SE:	PSD-CIS A	ICS - PSD-CIS USE			
R No.		2024-08-09	<u>67</u>			
			dder MUST SIGN the original copy of Purchase Or rested and will be a ground for suspension or blackli		FAILURE to sign	the original P.O
	NEL V. R.				Supplier	

Signature over Printed Name

Company Name:			RFQ No. 24-0967-NP-	SVP			
Company Address:			Date: 02-Aug-24				
Contact Person:			_				
Contact No. :			_				
Philgeps Reg. No. : Company TIN:			_				
			_				
Email Address:			-				
Sir/Madam:							
			icable taxes, and other incidental expenses for us with descriptive brochures, catalogues, liter				
If you are the exclusive manufactertification to this effect.	cturer, distributor or age	nt in the Philippines for the g	oods listed in Annex A please attach in your q	uotation a duly notarized			
As a condition for award, you	will be required to sub	omit the following documen	tary requirements:				
* Accomplished Quot	ation (for goods or infr	a)/Proposal (for consulting)				
* Mayor's Permit			* Income/Bussines Tax Returns for Contamounting above Php. 500k	Statement for contracts with an ABC			
* PhilGEPS Registrat	tion No.		*Notarized Omnibus Sworn Statement for amounting to above Php. 50,000.00				
* PCAB license (for in			amounting to above 1 np. 30,000.00				
Note:Submission of PhilGEPS I	Platinum Certificate of R	Registration and Membership	is acceptable in lieu of the Mayor's Permit and	l PhilGEPS Reg. No.			
	nen, Cagayan de Oro Cit	y or email it to bac <u>.fo10@ds</u>	ocuments to DSWD – Procurement Unit, DSW wd.gov.ph not later than 5:00 PM on AUGUs				
submitted to different email add	ress as stated above shar	i not be considered for evalua-		ery Truly Yours,			
			V	ary fruity fours,			
				NEL V. RADAZA O Procurement Officer			
Terms and Conditions:							
1. Award shall be made on per:	☑ Item Basis	☐ Total Quoted Price	☐ Lot Basis				
2. Quotation validity shall be:	6 Months						
3. Goods/Services shall be delivered/conducted within	15-30 working days up	15-30 working days upon receipt of PO					
4. Place of Delivery	DSWD Field Office 10)					
5. Terms of Payment:	15-30 days after the in	<u>-</u>					
Payment through LDDAP-ADA (to Debit Account).				
Account Name		•	Account Number:				
Bank Nam	ie:						
*Note: Non Land Bank of the I	Philippines accounts shall	l be charged a service fee.					
one-tenth of one percent (0.001) o the amount of the contract, the Pro	f the cost of the unperform	ned portion for every day of del	fied above, the amount of the liquidated damage: ay. Once the cumulative amount of liquidated da hout prejudice to other courses of action and rem	mages reaches ten (10%) of			
<i>circumstances.</i> 7. For goods, please indicate brand,	model and country of orig	rin					
8. In case of discrepancy between u							
9. Please indicate Warranty		1					
10. In case of a tie, the contract sha	all be awarded to the suppli	er or service provider who first	submitted its quotation.				
11. NOTE: "Prospective supplier mwww.philgeps.gov.ph and register to	-	ilippine Government Electronic	Procurement System (PhilGEPS). You may visit the	he PhilGEPS website at			
ARNEL V. RADAZA			G 11				
Procurement Officer			Supplier Signature over Printed	Name			

Republic of the Philippines Department of Social Welfare and Development Field Office No. 10 Cagayan de Oro City

PROOF OF RECEIPT

Quotation No: 24-0967-NP-SVP

Items: OFFICE CHAIR

Purpose: PSD-CIS AICS - PSD-CIS USE

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	