## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

|                                     |              |                 | egistered at the Philippine Government Electronic Procurer<br>EPS website at www.philgeps.gov.ph and register for free. |  | <b>RFQ No.:</b> 24-1060-NP-SVP <b>Date:</b> 22 Aug 2024 |                  |  |
|-------------------------------------|--------------|-----------------|---|--|---|------------------|--|
| Compa                               | ny Name:     |                 |   |  |   |                  |  |
| _                                   | ny Addres    | s:              |   | 1  |   |                  |  |
| Contact                             | t Person:    |                 |   | !  |   |                  |  |
| Contact No.:                        |              |                 |   | !  |   |                  |  |
| PhilGE                              | PS Reg. N    | 0.:             |   | •  |   |                  |  |
| Compa                               | ny TIN:      |                 |   |  |   |                  |  |
| Email A                             | Address:     |                 | 7   |  |   |                  |  |
| Item<br>No.                         | Qty.         | Unit            | Purchaser's Specifications  | Bidder's Specifications<br>(Please fill out the detailed<br>specifications in the space<br>provided) | Unit Cost   | Total Cost       |  |
|                                     |              |                 | Drop off and Pick-up  |  |   |                  |  |
|                                     | 10           | van             | DSWD Field Office 10 to Venue (Any point of   |  |   |                  |  |
|                                     |              |                 | Region 10) and Vice Versa for 2 days  |  |   |                  |  |
|                                     |              |                 | Specification   |  |   |                  |  |
|                                     |              |                 | Proposed Date : November 27-29,2024   |  |   |                  |  |
|                                     |              |                 | Seating Capacity: 10-12 person  |  |   |                  |  |
|                                     |              |                 | *******NOTHING FOLLOWS****  |  |   |                  |  |
|                                     |              |                 |   |  |   |                  |  |
|                                     |              |                 |   |  |   |                  |  |
|                                     |              |                 |   |  |   |                  |  |
|                                     |              |                 | Approved Budget for the Contract  |  |   |                  |  |
|                                     |              |                 | (ABC): PhP 60,000.00  |  |   |                  |  |
| PURPO                               | SE:          | Conduct of      | CY 2024 Policy and Plans Division Year End Performa   | nce Rewarding  |   |                  |  |
| PR No.                              |              | 2024-08-106     | <u>50</u>   |  |   |                  |  |
| means th                            | at the bidde | r is not intere | der MUST SIGN the original copy of Purchase Order sted and will be a ground for suspension or blacklisting.             |  | FAILURE to sign   | the original P.O |  |
| ARNEL V. RADAZA Procurement Officer |              |                 |   | Supplier Signature over Printed Name   |   |                  |  |

| Company Name:   |                             |                                     | <b>RFQ No.</b> 24-1060-NP-SVP  |  |  |  |
|---|-----------------------------|-------------------------------------|--|--|--|--|
| Company Address:  |                             |                                     | <b>Date:</b> 22-Aug-24   |  |  |  |
| Contact Person:   |                             |                                     | _  |  |  |  |
| Contact No. :<br>Philgeps Reg. No. :                                      |                             |                                     | _  |  |  |  |
| Company TIN:  |                             |                                     | <del>-</del><br>-  |  |  |  |
| Email Address:  |                             |                                     | -<br>-   |  |  |  |
| Sir/Madam:  |                             |                                     |  |  |  |  |
|   |                             |                                     | cable taxes, and other incidental expenses for the goods listed in <b>Annex</b> us with descriptive brochures, catalogues, literatures and/or samples, if  |  |  |  |
| If you are the exclusive manufa certification to this effect.             | cturer, distributor or ag   | ent in the Philippines for the g    | oods listed in <b>Annex A</b> please attach in your quotation a duly notarized   |  |  |  |
| As a condition for award, you   | will be required to su      | ıbmit the following documen         | ary requirements:  |  |  |  |
| * Accomplished Quo  | tation (for goods or in     | fra)/Proposal (for consulting       |  |  |  |  |
| * Mayor's Permit  |                             |                                     | * Income/Bussines Tax Returns for Contract with an ABC amounting above Php. 500k   |  |  |  |
| * PhilGEPS Registra   | tion No.                    |                                     | *Notarized Omnibus Sworn Statement for contracts with an ABC amounting to above Php. 50,000.00   |  |  |  |
| * PCAB license (for i   |                             |                                     | amounting to above 1 np. 20,000,000  |  |  |  |
| Note:Submission of PhilGEPS   | Platinum Certificate of     | Registration and Membership         | is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.  |  |  |  |
| -   | nen, Cagayan de Oro C       | ity or email it to bac.fo10@ds      | ocuments to DSWD – Procurement Unit, DSWD Field Office 10, wd.gov.ph not later than 5:00 PM on August 27, 2024. Quotations attion.   |  |  |  |
|   |                             |                                     | Very Truly Yours,  |  |  |  |
|   |                             |                                     | ARNEL V. RADAZA DSWD 10 Procurement Officer  |  |  |  |
| Terms and Conditions:   |                             |                                     |  |  |  |  |
| 1. Award shall be made on per:  | ☐ Item Basis                | ☑ Total Quoted Price                | ☐ Lot Basis  |  |  |  |
| 2. Quotation validity shall be:   | <u>6 Months</u>             |                                     |  |  |  |  |
| 3. Goods/Services shall be delivered/conducted within                     | within the date of ac       | within the date of activity         |  |  |  |  |
| 4. Place of Delivery  | DSWD Field Office           | 10 to any point of Region 10        |  |  |  |  |
| 5. Terms of Payment:  | 15-30 days after the        | final inspections                   |  |  |  |  |
| Payment through LDDAP-ADA   | (List of Due and Deman      | dable Accounts Payable-Advice       | to Debit Account).   |  |  |  |
| Account Nam   |                             |                                     | Account Number:  |  |  |  |
| Bank Nan  |                             | all he changed a service for        |  |  |  |  |
| *Note: Non Land Bank of the   |                             | _                                   |  |  |  |  |
| one-tenth of one percent (0.001) of<br>the amount of the contract, the Pr | f the cost of the unperfo   | rmed portion for every day of del   | fied above, the amount of the liquidated damages shall be at least equal to ay. Once the cumulative amount of liquidated damages reaches ten (10%) of hout prejudice to other courses of action and remedies available under the |  |  |  |
| <i>circumstances.</i><br>7. For goods, please indicate brand              | model and country of or     | igin                                |  |  |  |  |
| 8. In case of discrepancy between 9. Please indicate Warranty             | •                           | •                                   |  |  |  |  |
| 10. In case of a tie, the contract sha                                    | all be awarded to the supp  | plier or service provider who first | submitted its quotation.   |  |  |  |
|   | nust be registered at the P |                                     | Procurement System (PhilGEPS). You may visit the PhilGEPS website at   |  |  |  |
|   |                             |                                     |  |  |  |  |
| ARNEL V. RADAZA Procurement Officer                                       |                             |                                     | Supplier   |  |  |  |
| i iocuicinciii Officei  |                             |                                     | 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:** 24-1060-NP-SVP

Items: Van Rental

**Purpose:** Conduct of CY 2024 Policy and Plans Division Year End Performance Rewarding

| Company Name | Representative | Position / Designation | Date | Signature |
|--------------|----------------|------------------------|------|-----------|
|              |                |                        |      |           |
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|              |                |                        |      |           |

| Canvasser | _ |  |  |
|-----------|---|--|--|