DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

			egistered at the Philippine Government Electronic Procur EPS website at www.philgeps.gov.ph and register for fre			24-0102-NP-SVP 7 Nov 2024
Contact Contact PhilGE Compa	ny Name: ny Addres t Person: t No.: PS Reg. N ny TIN: 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:			
			ROOF INSTALLATION AND SLAB LEVELLING FOR CAR LIFTER			
		DIRECT COST				
	1	LOT	SLAB LEVELLING			
	1	LOT	ELECTRICAL WORKS			
	1	LOT	STRUCTURAL FRAMING WORKS			
	1	LOT	FOUNDATION WORKS			
	1	LOT	ROOFING WORKS			
		<u> </u>				
		INDIRECT COST				
	1	LOT	PROFIT:			
	1	LOT	VAT:			
	1	LOT	осм:			
			********NOTHING FOLLOWS*****			
		1				
			Approved Budget for the Contract			
		†	(ABC): PhP 250,000.00			
PURPO	SE:	1		1		
PR No.	<u> </u>	BGM - RICT 2024-11-010	MS : ROOF INSTALLATION AND SLAB LEVELLIN 2	IG FOR CAR LIFTER		
			der MUST SIGN the original copy of Purchase Ord sted and will be a ground for suspension or blacklis		FAILURE to sign	the original P.O
	NEL V. R					
Pro	ocurement	Officer			Supplier over Printed Name	e

Company Names			DEO N o. 24 0102 ND SVD	
Company Name: Company Address:			RFQ No. 24-0102-NP-SVP Date: 07-Nov-24	
Contact Person:			Date. 07-1108-24	
Contact No.:			-	
Philgeps Reg. No. :			-	
Company TIN:			-	
Email Address:			-	
Sir/Madam:				
			cable taxes, and other incidental expenses for the goods listed in Anne us with descriptive brochures, catalogues, literatures and/or samples, if	
If you are the exclusive manufa certification to this effect.	cturer, distributor or agent	in the Philippines for the g	oods listed in Annex A please attach in your quotation a duly notarized	
As a condition for award, you	will be required to subn	nit the following documen	ary requirements:	
* Accomplished Quo	tation (for goods or infra)/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 AB amounting to above Php. 50,000.00	ı ABC
* PCAB license (for i	nfra)			
Note:Submission of PhilGEPS	Platinum Certificate of Re	egistration and Membership	is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.	
	nen, Cagayan de Oro City	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 November 11, 2024. Quotation: tion.	S
			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:	6 Months			
3. Goods/Services shall be delivered/conducted within	15-30 working days upo	on receipt of PO		
4. Place of Delivery	DSWD Field Office 10			
5. Terms of Payment:	15-30 days after the ins	pections		
Payment through LDDAP-ADA	(List of Due and Demandal	ble Accounts Payable-Advice	to Debit Account).	
Account Nam			Account Number:	
Bank Nan				
*Note: Non Land Bank of the	Philippines accounts shall b	be charged a service fee.		
one-tenth of one percent (0.001) of	of the cost of the unperforme	ed 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	f
7. For goods, please indicate brand	l, model and country of origin	n.		
8. In case of discrepancy between				
9. Please indicate Warranty				
10. In case of a tie, the contract sha	11	1	•	
11. NOTE: "Prospective supplier r www.philgeps.gov.ph and register		ippine Government Electronic	Procurement System (PhilGEPS). You may visit the PhilGEPS website at	
ARNEL V. RADAZA				
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: 24-0102-NP-SVP

Items: ROOF INSTALLATION AND SLAB LEVELLING FOR CAR LIFTER

Purpose: BGM - RICTMS : ROOF INSTALLATION AND SLAB LEVELLING FOR CAR LIFTER

Company Name	Representative	Position / Designation	Date	Signature

Canvasser	