



**Company Name:** \_\_\_\_\_  
**Company Address:** \_\_\_\_\_  
**Contact Person:** \_\_\_\_\_  
**Contact No. :** \_\_\_\_\_  
**Philgeps Reg. No. :** \_\_\_\_\_  
**Company TIN:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_

**RFQ No.** 25-0006-NP-SVP

**Date:** 03-Feb-25

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 information could be basis for non – compliance. Also, furnish us with 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.

**As a condition for award, you will be required to submit the following documentary requirements:**

\* **Accomplished Quotation (for goods or infra)/Proposal (for consulting)**

\* **Mayor's Permit**

\* **PhilGEPS Registration No.**

\* **PCAB license (for infra)**

\* **Income/Bussines Tax Returns for Contract with an ABC amounting above Php. 500k**

\***Notarized Omnibus Sworn Statement for contracts with an ABC amounting to above Php. 50,000.00**

**Note:**Submission of PhilGEPS Platinum Certificate of Registration and Membership is acceptable in lieu of the Mayor's Permit and PhilGEPS Reg. No.

Please accomplish and submit this form together with Annex A and all the required documents to DSWD – Procurement Unit, DSWD Field Office 10, Masterson Avenue, Upper Carmen, Cagayan de Oro City or email it to [bac.fo10@dswd.gov.ph](mailto:bac.fo10@dswd.gov.ph) not later than **5:00 PM on FEBRUARY 7, 2025**. Quotations submitted to different email address as stated above shall not be considered for evaluation.

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 upon receipt of PO**
4. Place of Delivery **DSWD Field Office 10**
5. Delivery Term: **Cut-off Time for Deliveries during Office Hours**  
**8 AM - 4 PM - Monday to Thursday**  
**8 AM - 12 NN - Friday**

For delivery arrangements, please contact the Contract Implementation Unit to confirm the schedule.

Mai2x - **09954312982**

Nadj - **09286163107**

Froilan - **09519204261**

6. Terms of Payment: **15-30 days after the inspections**

Payment through **LDDAP-ADA (List of Due and Demandable Accounts Payable-Advice to Debit Account)**.

**Account Name:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_

**Bank Name:** \_\_\_\_\_

**\*Note: Non Land Bank of the Philippines accounts shall be charged a service fee.**

7. Liquidated Damages/Penalty: *In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.*

8. For goods, please indicate brand, model and country of origin.

9. In case of discrepancy between unit cost and total cost, unit cost shall prevail.

10. Please indicate Warranty \_\_\_\_\_

11. In case of a tie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.

12. 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](http://www.philgeps.gov.ph) and register for free."

**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:** 25-0006-NP-SVP

**Items:** Proposed Repair of Comfort Rooms and Septic Tank and Construction of Line Canal of Regional Rehabilitation Center for Youth

**Purpose:** CRCF - RRCY RM-BUILDINGS

<b>Company Name</b>	<b>Representative</b>	<b>Position / Designation</b>	<b>Date</b>	<b>Signature</b>

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**Canvasser**