

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Annex A

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.
Date:

Company Name: _____
Company Address: _____
Contact Person: _____
Contact No.: _____
PhilGEPS Reg. No.: _____
Company TIN: _____

| Lot No. | Qty. | Unit | Purchaser's Specifications | Unit Cost per Item | Bidder's Specifications (Please fill out the detailed specifications in the provided) | Unit Cost | Total Cost |
|---------|------|------|---|--------------------|--|-----------|------------|
| | 1 | | Office rental | | | | |
| | | | Specification: | | | | |
| | | | Area of 120 square meters preferably accessible with guest room, kitchen, parking area and can accommodate 18 staff | | | | |
| | | | April - December 2022 | | | | |
| | | | *****NOTHING FOLLOWS***** | | | | |
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PURPOSE: _____

PR No. _____
 IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O) upon receipt of the P.O. FAILURE to sign the original P.O means that the bidder is not interested and will be a ground for suspension or blacklisting in DSWD's future biddings.

ARNEL V. RADAZA
 Procurement Officer

 Signature over Printed Name

Company Name: _____
Company Address: _____
Contact Person: _____
Contact No. : _____
Philgeps Reg. No. : _____
Company TIN: _____

RFQ No.: 0
Date: 0-Jan-00

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 your Mayor's/Business Permit. The Certificate of Platinum Membership may be submitted in lieu of the Mayor's/Business Permit and PhilGEPS Registration Number.

Please accomplish and submit this form together with Annex A and all the required documents to DSWD – BAC Secretariat at Procurement Unit, DSWD Field Office 10, Masterson Avenue, Upper Carmen, Cagayan de Oro City or email it to bac.fo10@dswd.gov.ph not later than _____ of _____. 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:

- Award shall be made on per: Item Basis Total Quoted Price Lot Basis
- Quotation validity shall be _____
- Goods/Services shall be delivered/conducted within 15 Working days upon receipt of PO
- Place of Delivery DSWD Field Office 10
- 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 _____ Branch: _____

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

- 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.*
- For goods, please indicate brand, model and country of origin.
- In case of discrepancy between unit cost and total cost, unit cost shall prevail.
- Please indicate Warranty _____
- In case of a tie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.
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ARNEL V. RADAZA
Procurement Officer

(Signature Over Printed Name) **SUPPLIER**