DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

| Compan | y Name: y Address Person: | s : | | _ _ _ | | |
|-------------|---------------------------------|-------------|---|---|---------------------|-------------------|
| | No.: 'S Reg. No | . • | | _ | | |
| Compan | | , | - | _ | | |
| Email A | | | | _ | | |
| | | <u> </u> | | D: 11!- C!f'4' | | |
| 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: | | | |
| | 10 | VAN | VAN RENTAL | | | |
| | | | | | | |
| | | | DAY 1: SEPTEMBER 26,2024 | | | |
| | | | DAY 2: SEPTEMBER 27,2024 | | | |
| | | | | | | |
| | | | DROP-OFF AND PICK UP | | | |
| | | | NO. OF DAYS: 2 | | | |
| | | | NO. OF PAX : 50 PAX | | | |
| | | | ********NOTHING FOLLOWS***** | | | |
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| | | | | | | |
| | | | Approved Budget for the Contract | | | |
| | | | (ABC): PhP 68,000.00 | | | |
| URPOS | E: | DDD TAAO | DDSS For the Conduct of Island Cluster Consultation Di | alogue with the Legal Chief Evenutiv | ros I SWDO boods | and DCWD Connetor |
| PR No. | | 2024-09-109 | RSS - For the Conduct of Island-Cluster Consultation Di | alogue with the Local Chief Executiv | es, LS w DO neads : | and DSWD Secretar |
| | | | | der (P.O) upon receipt of the P.O. | | |

Signature over Printed Name

| ~ | | | DDG N | |
|---|-------------------------------|---------------------------------|--|----|
| Company Name: | | | RFQ No. 24-1099-NP-SVP | |
| Company Address: | | | Date: 10-Sep-24 | |
| Contact Person: Contact No. : | | | - | |
| Philgeps Reg. No. : | | | - | |
| Company TIN: | | | - | |
| Email Address: | | | - | |
| Email Address: | | | _ | |
| Sir/Madam: | | | | |
| | | | cable taxes, and other incidental expenses for the goods listed in Ann us with descriptive brochures, catalogues, literatures and/or samples, i | |
| If you are the exclusive manufa certification to this effect. | cturer, distributor or agen | t in the Philippines for the g | oods listed in Annex A please attach in your quotation a duly notarized | d |
| As a condition for award, you | will be required to sub | nit the following documen | ary requirements: | |
| * Accomplished Quo | tation (for goods or infra | n)/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 AE amounting to above Php. 50,000.00 | вC |
| * 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 September 16, 2024. Quotation tion. | ıs |
| | | | 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 | spections | | |
| Payment through LDDAP-ADA | (List of Due and Demanda | ble Accounts Payable-Advice | to Debit Account). | |
| Account Nam | e: | | Account Number: | |
| Bank Nan | | | | |
| *Note: Non Land Bank of the | Philippines accounts shall | be charged a service fee. | | |
| one-tenth of one percent (0.001) of | of the cost of the unperform | 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%) about prejudice to other courses of action and remedies available under the | of |
| 7. For goods, please indicate brand | I. model and country of origi | n. | | |
| 8. In case of discrepancy between | | | | |
| 9. Please indicate Warranty | | | | |
| 10. In case of a tie, the contract sha | all be awarded to the supplie | r or service provider who first | submitted its quotation. | |
| 11. NOTE: "Prospective supplier is www.philgeps.gov.ph and register | | ippine Government Electronic | Procurement System (PhilGEPS). You may visit the PhilGEPS website at | |
| ADMINI W DANGE | | | | |
| ARNEL V. RADAZA Procurement Officer | | | Supplier | |
| 1 Tocurement Officer | | | 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: | 24-1099-NP-SVP |
|---------------|----------------|
| | |

Items: VAN RENTAL

Purpose:

PPD TAAORSS - For the Conduct of Island-Cluster Consultation Dialogue with the Local Chief Executives, LSWDO heads and DSWD Secretors.

DSWD Secretary

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