DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

"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.: 25-0167-NP-SVP **Date:** 2025-3-4

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

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	set	DSWD RETIREES KIT Inclusions: • 1 pc Customized Box with print: DSWD Logo and "Retirees Kit" Dimensions (LWH): 14.25" x 14.25" x 4.75" Design: Double Door Type - Premium Box Materials: Buffalo Skin (Burgundy) Covered Chip Board (1.5mm) • 1 pc Collared Jacket, black, with embroidered DSWD Logo • 1 pc Tumbler, black, stainless steel, double wall, 500ml, with DSWD Logo • 2 bxs Tea Bags - "Pure Chamomile" and "Green Tea and Lemon" • 1 pc Wooden Coaster, personalized with laser engraved name • 1 set Wine Wooden Box Set with Wine Tool Set (Wine Stopper, Corkscrew, Wire Pourer, Drip Ring, Foil Cutter) • 1 btl Rosé Wine, 750ml Customized Box with printed DSWD Logo and "Retirees Kit" print *Dimensions: W: 14.25 L: 14.25 H: 4.75 Design: Double Door Type - Premium Box Materials: -STAR B-COVER			

			Note: - Customized Box with printed DSWD Logo and "Retirees Kit" print *Dimensions: W: 14.25 L: 14.25 H: 4.75 Design: Double Door Type - Premium Box Materials: -STAR B-COVER BUFFALO SKIN (Burgundy) -Chip Board 1.5mm Black Collared Jacket with embroidered DSWD logo (black) Black Tumbler with DSWD Logo (black) - 500ml double wall stainless Tea Bags (2 box Pure Chamomile, Green Tea and Lemon) Wooden Coaster (Personalized laser engrave) Wine Wooden Box Set w/ Wine Tool Set (Wine Stopper, Corkscrew Opener, Wine Pourer, Drip Ring, Foil Cutter) Wine - Rose Wine ************************************			
			Approved Budget for the Contract			
			(ABC): PhP 55,000.00			

PURPOSE: DSWD 74TH ANNIVERSARY- RETIREES KIT

PR No. <u>2025-03-0167</u>

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 ground for suspension or blacklisting in DSWD's future biddings.

ARNEL V. RADAZA Procurement Officer

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

Sir/Madame

Please qoute your government price/s including delivery charges, VAT or other incedental 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 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 Quotations (for goods or infra)/ Proposal (for consulting)
- * Mayor's Permit
- * PhilGEPS Registration No.
- * PCAB License (for infra)

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 not later than ______. 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: Quotation validity shall be: Goods/Services shall be delivered/conducted within: 	⊠Item Basis 6 Months	□Total Quoted Price	□Lot Basis	
	15-30 CD after date of receipt of PO			
4. Place of Delivery:	Field Office 10			
5. Delivery Term:	Cut-off Time for De	eliveries during Office Hours		
	8 AM - 4 PM - Mon	day to Thursday		
	8 AM - 12 NN - Fri	day		

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 CD after date of Final Inspection
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 Damage/Penalty: In case of failure to make full delivery within the time specified above, the amount of Liquidated damages shall be at least equal to one-tenth of one percent (0.01) 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 remidies 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 Philippines Government Electronic Procurement System (PhulGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free".

25-0167-NP-SVP

2025-3-4

RFO No.

Date:

* Income/Business Tax Return for Contract with an ABC

* Notarized Omnibus Sworn Statement for contracts with

an ABC amounting to above Php.50,000.00

amounting above Php.500k

Republic of the Philippines Department of Social Worker and Development Field Office No. 10 Cagayan de Oro City

PROOF OF RECEIPT

Quotation No: 25-0167-NP-SVP

Items:

Purpose: DSWD 74TH ANNIVERSARY- RETIREES KIT

Company Name	Representative	Position/ Designation	Date	Signature

Canvasser