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DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
IBP Road, Constitution Hills, Quezon City

REQUEST FOR QUOTATION

RFQ No. **21-0155 SHOPPING (b)**
Date: **March 8, 2021**

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

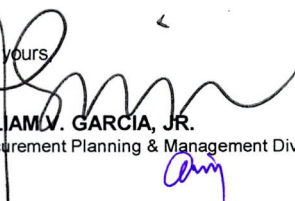
Sir/Madam:

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 payment, 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 2nd Floor Mahusay Building, DSWD Central Office, IBP Road, Constitution Hills, Quezon City or fax it through numbers 8951-7116 or email to quotations@dswd.gov.ph not later than **1:00 PM of March 18, 2021 (Thursday)**. Quotations submitted to different fax number(s) or email address(es) as stated above shall not be considered for evaluation.

Very truly yours

WILLIAM V. GARCIA, JR.
Officer-In-Charge, Procurement Planning & Management Division

Terms and Conditions:

- Award shall be made on per: Item Basis Total Quoted Price Lot Basis
- Quotation validity shall be Sixty (60) calendar days from the deadline of submission of quotations.
- Good/s shall be delivered within Ten (10) working days from receipt of Purchase Order (PO).
- Place of Delivery: DSWD-Central Office, PSAMD Warehouse, IBP Road, Constitution Hills Q.C.
- Terms of Payment: within 15-30 days upon completion of supporting documents.
Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable-Advise to Debit Account).
Account Name : _____ Account Number : _____
BankName : _____ 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 percent (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.
- 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."


RODEL D. TORRATO
Procurement Officer

(Signature over Printed Name)
Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

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LOT	Qty.	Unit	Purchaser's Specifications	Unit Cost	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
1	150	Piece	Surgical Mask Surgical, Disposable, ear loop, 3ply,wired	14.04			
	6	Roll	Tape, Masking, width:24mm	54.60			
	6	Roll	Tape, Masking, width:48mm	106.60			
	6	Roll	Tape, Packaging, width:48mm	19.97			
	9	Piece	Marker, Permanent, Bullet Type, Black	8.98			
	9	Piece	Marker, Permanent, Bullet Type, Blue	8.98			
	3	Bundle	Rags, All Cotton,, 32 pieces per kilogram min	53.82			
	30	Piece	Sign Pen, Black, Liquid/gel ink, 0.5mm needle tip	34.61			
	30	Piece	Sign Pen, Blue, Liquid/gel ink, 0.5mm needle tip	34.61			
				Approved Budget for the Contract (ABC): PhP 5,592.72			
2	4	Cartridge	Toner Cart, Brother TN-3478, Black	6,370.00			
	18	Cartridge	Ink Cart, HP CN053W (HP932XL) Black	1,700.00			
	18	Cartridge	Ink Cart, HP CN054W (HP933XL) Cyan	1,000.00			
	18	Cartridge	Ink Cart, HP CN055W (HP933XL) Magenta	1,000.00			
	18	Cartridge	Ink Cart, HP CN056W (HP933XL) Yellow	1,000.00			
			Approved Budget for the Contract (ABC): PhP 110,080.00				
			xxxxx-Nothing Follows-xxxxx				

PURPOSE: Office Supplies of COA-DSWD for the 1st quarter for the CY 2021

PR No. 01-20001-PR-2021-02-00160

IMPORTANT: The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWD-Central Office, Procurement Management Service. FAILURE to show up and 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.

RODEL D. TORRATO
Procurement Officer

Page 1 of 1 page

(Signature over printed name)
Supplier

Trunkline: 89318101 to 07 Voip 10093 and 10097
Fax No. 8951-7116