

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

37

REQUEST FOR QUOTATION

RFQ No. 19-1055 Shopping (B)
Date: June 11, 2019

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 award, you will be required to submit your **Mayor's/Business Permit, within 24 hours from receipt of notice**. The updated **Certification 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 Ground floor, DSWD-CO Building, IBP Road, Constitution Hills, Quezon City or fax it through number **951-7116** or email to **quotations@dswd.gov.ph** not later than **5:00 P.M of 20 June 2019**. Quotations submitted to different fax number(s) or email address(es) as stated above shall not be considered for evaluation.

Very truly yours,

Karina A. Agudo

KARINA ANTONETTE A. AGUDO
Chief Administrative Officer of PPMD and OIC for,
Procurement Management Service

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 **Fifteen (15) working days upon receipt of Purchase Order**
- Place of Delivery: **DSWD-PS Warehouse, DSWD Central Office, IBP Road, Batasan Hills, Quezon City**
- Terms of Payment: **within 15-30 days upon complete submission 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."
- NOTE:** To facilitate the immediate implementation of the procurement of this project, the DSWD shall proceed with the procurement activities short of award, pursuant to Section 7.6 of the 2016 Revised IRR of R.A. 9184.

RENEL JOANNE G. GAMBITO
Procurement Officer

tel. Nos. 931-6139/ 931-8101 to 07 local 122/12.

(Signature over Printed Name)
Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

RFQ No. **19-1055** Shopping (B)
Date: June 11, 2019Company Name : _____
Company Address : _____
Contact Person : _____
Contact No. : _____
Philgeps Reg. No : _____
TIN No. : _____

| Lot No. | Qty. | Unit | Purchaser's Specifications | Bidder's Specifications (Please indicate the detailed specifications of the product/services being offered in the space provided below) | Unit Cost | Total Cost |
|---------|------|-------|------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|
| 1 | 2 | unit | Memory Card, SD Card, 64GB, Class 10 | | | |
| | | | Approved Budget for the Contract: PhP4,000.00 | | | |
| 2 | 2 | unit | Mouse with Scroll | | | |
| | | | Type: Wireless | | | |
| | | | Range: Atleast 10 meters | | | |
| | | | Power: On/Off Switch | | | |
| | | | Connection Interface: USB Receiver | | | |
| | | | Power: AA Battery | | | |
| | | | Approved Budget for the Contract: PhP3,000.00 | | | |
| 3 | 6 | unit | Computer Mouse, Type: USB 2.0, Connectivity: Plug and Play | | | |
| | | | Approved Budget for the Contract: PhP2,400.00 | | | |
| 4 | 5 | piece | Keyboard | | | |
| | 10 | piece | Mouse Pad | | | |
| | 10 | ie | Mouse, Wireless | | | |
| | | | Approved Budget for the Contract: PhP8,000.00 | | | |
| | | | Page 1 of 2 | | | |

PURPOSE : For the use of AS-PSAMD, OUSSC, PMB, AS-OD, LS, HRMDS**PR No.** 2019010263, 2019020507, 2019031031, 2019041164, 2019041231, 2019041175**IMPORTANT:** The winning bidder **MUST** pick-up duplicate copy and **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/blacklisting in DSWD's future biddings.


RENEL JOANNE G. GAMBITO
 Procurement Officer
 Tel no. 951-7116 / Fax No. 931-6139

 (Signature over printed name)
 Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

RFQ No. 19-1055 Shopping (B)
 Date: June 11, 2019

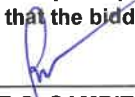
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|---------|------|------|-------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------|
| 5 | 3 | unit | All-In-One Printer | | | |
| | | | Function: Print, Scan, Copy | | | |
| | | | Monthly Duty Cycle: ≥ 1,000 impression | | | |
| | | | Copying | | | |
| | | | Copy Speed: ≥ 5 cpm (black) ≥ 3 cpm (color) | | | |
| | | | Copy Resolution: 600 dpi (black) 600 (color) | | | |
| | | | Printing | | | |
| | | | Print Speed: ≥ 5 ppm (black) ≥ 3 ppm (color) | | | |
| | | | Print Resolution: ≥ 600 x 600 dpi | | | |
| | | | Scanning | | | |
| | | | Optical Resolution: ≥ 600 dpi | | | |
| | | | Bit Depth: ≥ 24 bit | | | |
| | | | File Format Supported: PDF, TIFF, JPEG | | | |
| | | | Document and Media Handling | | | |
| | | | Document Feeder Sheet Capacity: 20 sheets | | | |
| | | | Document Feeder Max Size Capacity: at least A4 | | | |
| | | | Max Copy Size: at least A4 | | | |
| | | | Paper Tray Sheet Capacity: ≥ 100 sheets | | | |
| | | | Paper Tray Max Size Capacity: at least A4 | | | |
| | | | PC Connectivity | | | |
| | | | Connection: Hi-Speed USB 2.0 | | | |
| | | | Warranty and SLA: 1 year Hardware Warranty | | | |
| | | | Approved Budget for the Contract: PhP44,997.00 | | | |
| | | | xxxxxxxxxx-Nothing Follows-xxxxxxxxxx | | | |
| | | | Page 2 of 2 | | | |

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