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

REQUEST FOR QUOTATION

RFQ No. **20-0627 Shopping (B)**

Date: July 8, 2020

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

Benny

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 **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 Ground floor, DSWD-CO Building, IBP Road, Constitution Hills, Quezon City or fax it through numbers 951-7116 or email to quotations@dswd.gov.ph not later than **01:00 p.m of July 16, 2020**. Quotations submitted to different fax number(s) or email address(es) as stated above shall not be considered for evaluation.



Very truly yours,

[Signature]
WILLIAM V. GARCIA JR.
Officer-In-Charge, PPMD-PMS

Terms and Conditions:

1. Award shall be made on per: Item Basis Total Quoted Price Lot Basis
2. Quotation validity shall be **60 calendar days** from the deadline of submission of quotations
3. Good/s shall be delivered within **Seventeen (17) Working days upon receipt of Purchase Order (P.O)**
4. Place of Delivery: **DSWD-Central Office, Procurement Service - Warehouse, IBP Road, Constitution Hills Q.C.**
5. Terms of Payment: **within 15-30 days upon completion of all 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.**
6. 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.
7. For goods, please indicate brand, model
8. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
9. Please indicate Warranty: _____
10. In case of a tie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.
11. **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."
12. 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.

[Signature]
RODEL D. TORRATO

Procurement Officer

(Signature over Printed Name)

Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Batasan Pambansa Complex, Constitution Hills, Quezon City

20-0627 Shopping (B)
 RFQ No. _____
 Date: July 8, 2020

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

Lot No.	Qty.	Unit	Purchaser's Specifications	UNIT COST	Bidder's Specifications (Please write the detailed specifications in the space provided)	Unit Cost	Total Cost
1			Supply and Delivery of Printer or Facsimile or Photocopier Supplies for 1st Quarter				
	8	cartridge	TONER CARTRIDGE, BROTHER TN-340 BK, black	5,000.00			
	5	cartridge	TONER CARTRIDGE, BROTHER TN-340 C, cyan	5,500.00			
	5	cartridge	TONER CARTRIDGE, BROTHER TN-340 M, magenta	5,500.00			
	5	cartridge	TONER CARTRIDGE, BROTHER TN-340 Y, yellow	5,500.00			
	8	cartridge	CARTRIDGE, CANON-319, BLACK	4,770.00			
	6	cartridge	CARTRIDGE, CANON-318, BLACK	6,300.00			
	3	cartridge	CARTRIDGE, CANON-318, CYAN	6,000.00			
	3	cartridge	CARTRIDGE, CANON-318, MAGENTA	6,000.00			
	3	cartridge	CARTRIDGE, CANON-318, YELLOW	6,000.00			
	6	cartridge	CARTRIDGE, CANON-332, BLACK	8,300.00			
	4	cartridge	CARTRIDGE, CANON-332, CYAN	12,258.00			
	4	cartridge	CARTRIDGE, CANON-332, MAGENTA	12,258.00			
	4	cartridge	CARTRIDGE, CANON-332, YELLOW	12,258.00			
			Approved Budget for the Contract (ABC): Php 449,356.00 xxxxx-Nothing Follows-xxxxx				

PURPOSE: Procurement of Printer or Facsimile or Photocopier Supplies for the 1st Quarter

PR No. 01-20001-PR-2020-03-00186

IMPORTANT : The winning bidder **MUST SIGN** the original copy of Purchase Order (P.O.) at DSWD-Central Office, Procurement and Supply Division within three (3) days from the date the P.O was served thru fax/email. **FAILURE** to show up and sign the original P.O. means that the bidder is not interested and will be ground for suspension/blacklisting in DSWDs future biddings.



RODEL D. TORRATO

Procurement Officer

Tel. Nos. 931-6139/ 931-8101 to 07 local 122/124

 (Signature over printed name)
Supplier