

## DSWD DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

## **REQUEST FOR QUOTATION** SHOPPING

		RFQ No.	: DSWD7-2022- 0352
		Date	March 21, 2022
Company Name	\$ <u></u>		
Company Address	:		
Contact Person			
Contact No.	:		
PhilGEPS Registration	on No.:		
Sir/Madam:			
expenses for the doc	overnment price/s including delivery charges, \ods listed in Annex A. Failure to indicate inform descriptive brochures, catalogues, literatures a	nation could be t	ha hacie for non compliance Alex
If you are the exclus	ive manufacturer, distributor or agent in the P ion/s a duly notarized certification to this effect.	hilippines for the	e goods listed in Annex A, please
Interested supplier/s Number upon submis	are required to submit true copies of their ssion of quotation/s.	valid <b>Mayor's</b>	Permit & Philgeps Registration
DOVAD FIEld Office (	and submit this <b>form</b> together with <b>Annex A</b> VII, Cebu City or send it through facsimile nul  to bac.fo7@dswd.gov.ph on or before <b>March 2</b>	mbers (032) 233	3-8785 233-0261 231 2172 loop
		Very truly	yours,
			MMP
			P. BACONG
		AO V/Heac	d, Procurement Management Section
Terms and Condition			
<ol> <li>Award shall be made</li> <li>Quotation validity s</li> </ol>	de on per: item basis _ <b>√</b> total quote that the property item basis _ <b>√</b> total quote that the property is a substitution of the property in the property is a substitution of the property in the property is a substitution of the property in the property is a substitution of the property in the property is a substitution of the property is	ed price	ot basis
<ol> <li>Good/s or Services</li> <li>Place of Delivery:</li> </ol>	shall be delivered within 30 days calendar from DSWD Field Office VII, Carreta, Cebu City		
5. Terms of Payment	within 30 calendar days from the complete / Sales Invoice.	ion of delivery a	and receipt of Billing Statement
<ol><li>Liquidated Damage</li></ol>		veryday of dela	v shall be imposed.
<ol><li>In case of discrepal by the quantity of th</li></ol>	ncy between total price per item and unit price nat item, the latter shall prevail.	for the item as e	extended or multiplied
8. Warranty Period, if	applicable:		1
		R	onepart DCI
		BONA	PARTE D. CASEÑAS II
. (20.20 000 70.3)		7, <del></del>	Canvasser
am interested to quo	te and agree to the terms and conditions.		
(Signature o	over Printed Name of Supplier /		
	orized Representative)		

Page 1 of 2



## DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT Field Office VII, Cebu City

					RFQ No.:	DSWD7-2022- 0352	
					Date:	March 21, 20	22
Compar	ny Nam	9		200	<u></u>		
Compar	ny Addre	ess					
Contact	Person				-70		
Contact	No.						
PhilGEF	S Regi	stration No	·				
Item No.	Qty.	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specificatio ns	Unit Cost	Total Cost
1 20	20	unit	1HP Window Type Aircon. Non-Inverter				
			Specifications: - at least 9200kJ/h cooling capacity - at least 10.4 kJ/h/w EER - R410A Refrigerant				
			<ul> <li>w/ 24 hours timer</li> <li>1-year General Warranty</li> <li>5-years Compressor Warranty</li> </ul>				
Approv	ed Bud	get for th	e Contract: Php 298,000.00	Note: "Bidder	's Specifica	tions" column	may be filled u
End U	ser:	with supplie		's offer (bra	nd, model, orig	in) or may cop	
Purpo	se :	For Pa	intawid Program office use				

Note: Procurement procedure in accordance with DSWD-Memorandum Circular No. 2, Series of 2007.

BONAPARTE D. CASEÑAS II
Canvasser

Signature of Supplier / Authorized Representative Over Printed Name

Page 2 of 2