



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. : **DSWD7-2023-1195**

Date : **August 29, 2023**

Company Name : \_\_\_\_\_  
Company Address : \_\_\_\_\_  
Contact Person : \_\_\_\_\_  
Contact No. : \_\_\_\_\_  
PhilGEPS Registration No.: \_\_\_\_\_

**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 the basis for non-compliance. Also, kindly 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.

Interested service providers are required to submit true copies of their valid **Mayor's/Business Permit & Philgeps Registration Number** upon submission of quotation.

Please accomplish and submit this **form** together with **Annex A** and **Bank Information** to the BAC Secretariat, DSWD Field Office VII, Cebu City or send it through facsimile numbers (032) 233-8785; 233-0261; 231-2172 local 140 or 148 or e-mail to bac.fo7@dswd.gov.ph on or before **September 1, 2023 at 5:00PM.**

Very truly yours,

**ENGR. EMMANUEL M. EDLES**  
AO V/Head, Procurement Management Section

**Terms and Conditions:**

- Award shall be made on per: ☐ item basis ☒ total quoted price ☐ lot basis
- Quotation validity shall be not less than **60 calendar days.**
- Good/s or Services shall be delivered **within 15 days calendar from receipt and conformity of Purchase Order.**
- Place of Delivery: **Regional Warehouse, AVRC II Compound Camomot Franza Rd., Brgy. Labangon.**
- Terms of Payment: **within 30 days from the receipt of billing statement.**
- Liquidated Damages/Penalty: **One-tenth of one percent for everyday of delay shall be imposed.**
- In case of discrepancy between total price per item and unit price for the item as extended or multiplied by the quantity of that item, the latter shall prevail.
- Warranty period, if applicable: \_\_\_\_\_

**Bonaparte D. Caseñas II**  
Canvasser

I am interested to quote and agree to the terms and conditions.

\_\_\_\_\_  
(Signature over Printed Name of Supplier / Service  
Provider / Authorized Representative)



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

Company Name \_\_\_\_\_  
 Company Address \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Contact No. \_\_\_\_\_  
 PhilGEPS Registration No.: \_\_\_\_\_  
 Tin Number: \_\_\_\_\_

RFQ No. DSWD7-2023-1195

Date: August 29, 2023

Item No.	Quantity	Unit of Measure	Articles / Descriptions		Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	17,500	tin	<b>Supply and Delivery of Canned Corned Beef</b>					
			Type	Canned corned beef, plain (Not Guisado, Not Chunky/ Not Karne Norte) non - easy open can				
			Unit of Measure	Tin				
			Weight	at least 150g				
			Label/Marking Requirements	<p>Certification: Certified Halal Product printed on the product label.</p> <p>Nutritional Information: With Nutritional information in the label based on the nutritional daily allowance intake based on DOH AO No. 2014-0030, otherwise known as the "Rules and Regulations Governing the Labeling of Prepackaged Food Products Distributed in the Philippines."</p> <p>Expiration Date (to be printed on the packaging)</p>				

Item No.	Quantity	Unit of Measure	Articles / Descriptions		Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Packaging	<p>Tin Can Thickness not less than:  Top End: 0.14mm  Bottom: 0.14mm  Body: 0.14mm  (Supplier to provide Tin Can Analysis from DOST or any Certified 3rd Party to Conduct the test)  No. of Beads: Minimum of 10. of Beads</p>				
			Expiration	Should indicate Expiry Date of not less than two years and six months (2.5 years) from the date of delivery. Printed on the product tin/label				
			Shelf Life	Must have a shelf life of at least two years and six months (2.5 years) at the date of delivery				
			No. of Years in the Market	The brand must be existing in the Philippines Market for at least 5 years				
			FDA Certification	Submit a copy of the latest Food and Drug Administration (FDA) Certificate of Product Registration showing issuance and Expiry Date				
				<p>Tins must be packed in boxes by 48, 50, or 100 tins</p> <p>Hermitically sealed, showing no sign of corrosion at the welded joints or inside and no dent</p>				

Item No.	Quantity	Unit of Measure	Articles / Descriptions		Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Others	Damaged or defective items/goods shall be repaced within 30 days upon receipt by the supplier of the notice to replace from the labangon regional warehouse				
				Replacement period for damaged or defective items/goods shall be within 1 year warranty period from the delivery date.				
				Supplier must provide manual labor to unload and palletize the goods upon delivery				
		Place of Delivery	Cebu Regional Warehouse, AVRC II Compound, Camomot, Franza Rd., Brgy. Labangon, Cebu City					
		Delivery Schedule	Wihtin 15 calendar days upon receipt of PO					
			Payment	Payment shall be processed after delivery is completed and after submission of complete and correct sales document (Delivery Receipt and Sales/Charge Invoice) by the Supplier.				
Approved Budget for the Contract: <b>Php 498,750.00</b>					Note: "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.			
End User: <b>DRMD</b>								
PURPOSE : <b>As component for the production of Family Food Packs</b>								

*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

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