

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office VII Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION NP- SMALL VALUE PROCUREMENT

RFQ No. : DSWE

DSWD7-2025-0345 March 19, 2025

Company Name	:		
Company Address	:	6	
Contact Person	:		
Contact No.	:		
PhilGEPS Registrat	ion 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 guotation a duly notarized certification to this effect.

Interested supplier/s are required to submit true copies of their valid Mayor's Permit and Philgeps Registration Number upon submission of quotation/s. An **Omnibus Sworn Statement** is required prior to award.

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) 887-9720; 233-0261; 231-2172 local 17140 or 17110 or e-mail to bac.fo7@dswd.gov.ph on or before **March 25, 2025 at 5:00PM.**

AO V/Head, Procurement Management Section

Terms and Conditions:

1. Award shall be made on per: item basis ✓ total quoted price lot basis

- 2. Quotation validity shall be not less than 60 calendar days.
- 3. Good/s or Services shall be delivered please refer to Annex A
- 4. Place of Delivery: please refer to Annex A
- 5. Terms of Payment: within 30 days from the receipt of billing statement.
- 6. Liquidated Damages/Penalty: One-tenth of one percent for everyday of delay shall be imposed.
- 7. 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.

8. Warranty period, if applicable: _____

CHARL ALBERT J. TORREFIEL Canvasser

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

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

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Procurement Form No. 04-A (Annex A)

Annex A

RFQ No.: DSWD7-2025-0345

March 19, 2025

Date:

WDS

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

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

ltem No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply"	Bidder's Specifications	Unit Cost	Total Cost
1	10	unit	PROVISION OF VAN RENTAL SERVICES				
			Specifications:				
			*Service from DSWD Pantawid Office in Cebu City, Cebu going to Cebu Province with pick- up/drop off in the venue				
			* Can accommodate of at least 12 passengers in comfortable and normal sitting capacity			ñ	
			* In good running condition/ roadworthiness			1	
			* Fully air-conditioned and well-maintained				
			* Vehicle year model must be 2018 and above				
			* To pick-up and drop off passenger/staff and supplies from identified/designated pick up and drop off locations				
			* Vehicle rental to include licensed professional driver fuel/lubricant disinfect/sanitizer				
			* Driver must be fully vaccinated for Covid-19 virus				
			* Vehicle must be regulary cleaned and disinfected				
			* Rental service up to 10-14 hours per day on staggered or scheduled date/s by the end user				
			* Can immediately provide at least three (3) unit at a time, if necessary				
Appr	oved Bud		he Contract: Php 60,000.00	Note: ''Bidder's Specificat	ions" column may	be filled up with	service provider or may cop
End User: PANTAWID			"Articles/Description" stated if applicable.				
URF	POSE :	Purpos	e for CY 2025 Pantawid Region VII office to tra	nsport of Staff	f and Office s	supplies for	delivery

CHARL ALBERT J. TORREFIEL Canvasser

Signature of Supplier / Authorized Representative Over Printed Name

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