



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. : DSWD7-2025-0462

Date : April 8, 2025

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 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 **April 14, 2025 at 05:00PM**.

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 30 days from receipt and conformity of Purchase Order**.
- Place of Delivery: **DSWD FO VII, Corner M.J. Cuenco Avenue and Gen. Maxilom Ext., Carreta, Cebu City**
- 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: _____


CHARAL ALBERT J. TORREFIEL
Canvasser

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

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



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Field Office VII, Cebu City


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Company Address _____
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Tin Number: _____

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Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
1	1	lot	Replacement of Defective Parts for DSWD Vehicle Toyota with Plate No. SAA 3611 Scope of Works: *replacement and installation of tire *replacement of front brake pads Materials: *Tire 265/65R17 *Front brake pads set				
Approved Budget for the Contract: Php 68,218.00				Note: "Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated if applicable.			
End User: GSMS							
PURPOSE :		Replacement of defective parts for DSWD Vehicle Toyota, with Plate No. SAA 3611.					

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


CHARL ALBERT J. TORREFIEL
Canvasser

Signature of Supplier / Authorized Representative Over
Printed Name

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