

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 Date : June 16

: DSWD7-2025-0922

Company Name	:	
Company Address	:	
Contact Person	:	
Contact No.	;	
PhilGEPS Registrat	on No.:	ŝ

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. 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 June 20, 2025 at 5:00PM.

Very truly yours

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

lot basis

Terms and Conditions:

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

- 2. Quotation validity shall be not less than 60 calendar days.
- 3. Good/s or Services shall be delivered within 30 calendar days from receipt and conformity of Purchase Order.
- 4. Place of Delivery: DSWD FO VII, Corner M.J. Cuenco Avenue and Gen. Maxilom Ext., Carreta, Cebu City
- 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:

Canvasser

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

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

(page 1 of 2)

Procurement Form No. 04-A (Annex A)

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

Annex A

RFQ No.: DSWD7-2025-0922

June 16, 2025

Date:

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

WDSWD

ltem No.	Quantity	Unit of Measure		Arti	cles / Descript	tions		Statement of Compliance (State "Comply" or "Not Comply"	Bidder's Specifications	Unit Cost	Total Cost	
1	1	lot	Installati	ion of W	bor and I indow Bli and ACS	inds at 2	2nd Floor					
			Scope of W	/orks: -								
			1 Evnoncio	- º ACCI								
			1. Expansio	II & AUSV	VD, Zha Fi	001 /						
			*Zebra/Combi Blinds, high quality, 403 sq.ft., to include necessary accessories, supports and								2	
			brackets ,					8				
			Note: Subm		material fo	or approva	al prior to	22	30 30			
8		×	2nd Floor Expansion & ACSWD Window Blinds Dimensions							0a		
			Office	Width	Length	sq.m.	sq.ft.					
			Expansion	5.82	2.5	14.55	156.61					
				1.856	1.2	2.23	23.97					
				1.975	1.2	2.37	25.51	ų.		21		
				2.769	1.2	3.32	35.77					
			ACSWD	2.669	1.2	3.20	34.47					
			ACOVID	1.949	1.2	2.34	25.17					
				2.35	1.2	2.82	30.35	hi i				
		[]		2.438	1.2	2.93	31.49					
				3.05	1.2	3.66	39.40					
			(Suppliers to	o do actua	al inspectio	n / measu	urement)					
Tot	al:											
Approved Budget for the Contract: Php 81,000.00 Note:												
End L	nd User: GSMS							"Bidder's Specificat "Articles/Description			n service provider or may copy	
PURF	PURPOSE : For the supply and installation of window blinds at DSWD FO7											

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

(page 2 of 2)