



REQUEST FOR QUOTATION
NP- SMALL VALUE PROCUREMENT

RFQ No. : DSWD7-2022- 0745
 Date : April 26, 2022

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. An Omnibus Sworn Statement shall be 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) 233-8785; 232-0261; 231-2172 local 140 or 148 or e-mail to bac.fo7@dswd.gov.ph on or before **May 02, 2022, 5:00pm**

Very truly yours,

[Signature]
ROSARIO P. BACONG

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, Item G. Contract Period**
4. Place of Delivery: **Within Region VII**
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: _____

[Signature]
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: _____

RFQ No.: DSWD7-2022- 0745

Company Address: _____

Date: April 26, 2022

Contact Person: _____

Contact No.: _____

PhilGEPS Registration No.: _____

Item No.	Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Unit Cost
1	1	lot	<p>PROVISION OF FLEET CARD DISTRIBUTOR / CREDIT FACILITY FOR PETROLEUM. OIL., AND LUBRICANTS FOR DSWD FIELD OFFICE VII VEHICLES</p> <p>Requirements:</p> <p>A. Card System Features</p> <ol style="list-style-type: none"> 1. Vehicle Card with Office Name and plate number embossed on each card. 2. Lead time of fifteen (15) calendar days to produce, deliver and use the cards. 3. Cards for the existing 23 vehicles and 8 equipment (forklifts & generators) (<i>please see attached list in Annex A</i>) 4. To have at least fifty (50) fleet card fuel stations within strategic location of Region VII <p>B. Product Restriction</p> <ol style="list-style-type: none"> 1. All fuels (gasoline, diesel) 2. Lubricants (Motor/Engine Oil, Break Fluid, ATF, and Coolant) 3. Other Services (Change oil, minor repair, etc.) <p>C. Purchase Limits:</p> <p>The Fuel Card Service Provider shall be responsible to dispense and make available at all times and at all branches of its stations with the contract period under the terms and conditions most advantageous to the government</p> <p>Based on the average consumption of the previous year, the following will be the Total fuel allocation within the contract duration (based on allocation /service vehicle / month indicated in Annex A):</p> <p>a. Diesel : 9,660 liters more or less</p> <p>b. Gasoline : 100 liters more or less</p> <p>Lubricants requirements within the contract duration:</p> <p>a. Motor/Engine Oil : 6 liters</p> <p>D. Membership Fee:</p> <p>Free membership and other fees for new members with the same terms and conditions.</p> <p>E. Other Services / Features:</p> <ol style="list-style-type: none"> 1. Provision of reports including detailed transactions reports 2. With Odometer Checking with each fuel purchase to calculate fuel consumption and monitoring 3. Since the driver can monitor the remaining balance of the card in every use, the driver will have to inform the General Services Management Section if the monthly allocation will be consumed before the end of the month so that the authorized personnel of General Services Management Section can request for additional allotment per month to avoid delays during week hours and Saturdays/Sundays/Holidays 		

Item No.	Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Unit Cost
			<p>4. If a particular vehicle was not able to consume its monthly allocation, the actual per month shall be charged to the Office</p> <p>5. Provision of basic services such as but not limited to change oil, minor repair and maintenance, etc.</p> <p>F. Schedule of Payment:</p> <p>Monthly actual fuel usage to be paid within thirty (30) days upon receipt of billing statement with complete supporting documents.. The Billing Documents of the Card Distributor must be attached with the Invoice Details from the POL Company</p> <p>G. Contract Period:</p> <p>* The contract period shall be at least for Three (3) months or until contact amount is exhausted.</p> <p>Without prejudice to the provisions of the applicable law, rules and regulations, the contract shall be automatically terminated when the amount specific for this contact has been exhausted.</p> <p>H. SAFETY FEATURES:</p> <p>* To protect the Office from possible fraud or misuse of fuel cards, the service provider shall put in place security features ensuring that every transaction will be accounted for through the monthly statement of account. Presentation of an approved trip ticket issued by General Services Management Section/ Administrative Office to the driver shall be a requirement by the fuel station before any transaction. With either system, every transaction is electronically captured, providing documented details.</p> <p>* Another security feature for the Vehicle-Card type of plan is the Odometer checking by the fuel station. This will confirm and verify if fuel has been gassed up to a particular DSWD vehicle per embossed plate number on the card. The kilometer reading of the vehicle shall be recorded every time the vehicle is gassed up. In this case, the fuel consumption and fuel efficiency of the vehicle will be validated. Also, the Service provider must provide DSWD Drivers a receipt/proof of transaction for every withdrawal of fuel/lubricants.</p> <p>* In the event of lost card, the General Services Management Section can advise for deactivation/ cancellation of the card and a replacement card can be issued upon request for minimum fee. The release of the replacement card should be within fifteen (15) calendar days upon reporting/filing of request. An Admin card must be provided to General Services to ensure that the vehicle with a lost card would be filled up with POL during the replacement period. General Services Management Section shall be responsible for the "Admin card".</p> <p>* In case the vehicle card is lost during travel outside Cebu City, Talisay City, Mandaue City, or Lapu-Lapu City and the vehicle needs to be gassed up, the driver will shoulder the fuel expenses subject for reimbursement.</p>		
Approved Budget for the Contract: Php 650,000.00				Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.	
End User:	GS		Purpose: Fuel Consumption for DSWD FO VII vehicles and equipment/generators/forklift		

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

Bonaparte D. Caseñas II
BONAPARTE D. CASEÑAS II
 Canvasser

Signature of Service Provider / Authorized Representative
 Over Printed Name