

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. | DSWD7-2022-1265 |
|--|--|--|--|
| | | Date | July 22, 2022 |
| Company Name | | | |
| Company Address | : | | |
| Contact Person | • | | |
| Contact No. | i | | |
| PhilGEPS Registration | on No.: | | |
| Sir/Madam: | 10000000 | | |
| Please quote your incidental expenses compliance. Also, kin | government price/s including delivery charges, for the goods listed in Annex A. Failure to indi adly furnish us with descriptive brochures, catalog | , VAT or ot icate informa ues, literatun | her applicable taxes, and other tion could be the basis for nones and/or samples, if applicable. |
| | ve manufacturer, distributor or agent in the Philip on a duly notarized certification to this effect. | | |
| Interested service pro | oviders are required to submit true copies of their upon submission of quotation. An Omnibus | valid Mayor Sworn State | 's/Business Permit & Philgeps ement shall be required prior to |
| Please accomplish at DSWD Field Office V 140 or 148 or e-mail to | nd submit this form together with Annex A and and all the country of the coun | l Bank Inforrs (032) 233- 22 at 5:00PM | mation to the BAC Secretariat, 8785; 233-0261; 231-2172 local |
| | | y truly yours, | |
| Terms and Condition | ROS AO | SARIO P BA | ACONG curement Management Section |
| Award shall be mad Quotation validity shall | nall be not less than 60 calendar days | | |
| 3. Good/s or Services | shall be delivered within 30 days calendar from | receipt and | Conformity of P O |
| and an admittery. | DOVID FIELD OTTICE VII Carreta Cobi Cit. | | |
| o. Terms of Fayment | Within 30 days from the receipt of billing atotal | ement. | |
| In case of discrepan | cy between total price per item and unit price for intity of that item, the latter shall prevail. | | shall be imposed. xtended or |
| B. Warranty period, if a | pplicable: | | |
| | | BONAP | hapante DCII |
| am interested to quote | and agree to the terms and conditions. | | Canvasser |
| | | | |
| Signature over Printed Provider / Autho | Name of Supplier / Service prized Representative) | | |

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| Company Name | |
|----------------------------|------------------------|
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| PhilGEPS Registration No.: | |
| Tin Number | |

| em Quant | Unit of Measure | | Statement of Compliance (State "Comply" or "Not Comply" | Bidder's Specifications | Unit Cost | Total Cost |
|----------|--------------------|---|--|----------------------------|-----------|------------|
| 1 1 | lot | Preventive Maintenance Services performing 170,000km with check up and minor repair of defective parts of DSWD Service Vehicle, ISUZU (DMAX) with Plate No. SAB 4901 | | | | |
| | | Scope of works: Performs PMS 170.000KM, Check-up Replace Throttle Body asm Replace Suction Control Valve Replace Injection oil seal / gasket Replace Main Switch Replace Door Switch Rear RH Engine Detailing Aircon cleaning (Pull-out Dashboard) Replace expansion valve Replace aircon drier Add Clutch fan silicon oil Replace Side Stepboard RH Replace Front Brake Pads Replace Front Brake Pads Replace Front Brake Shoe Replace Shackle Bushing Materials Engine oil Element Fuel filter (genuine) Element Fuel filter Sub (genuine) Brake cleaner Throttle Body asm (genuine) Suction Control Valve Injector Oil Seal Injector Gasket Valve Cover Gasket Brake pads (genuine) Washer Silicon Gasket Main switch (genuine) Door Switch Rear RH Expansion Valve (genuine) Aircon drier (genuine) Windshield washer fluid | | | | |

| Item No. | Quantity | Unit of Measure | | Statement of Compliance (State "Comply" or "Not Comply" | Bidder's Specifications | Unit Cost | Total Cost | | |
|-------------|-----------|---|---|--|---|-----------|------------|--|--|
| | | | Diesel treatment | | | | | | |
| 1 | | | Engine treatment | | | | | | |
| - 1 | | | Cabin Filter | | | | | | |
| 1 | 1 | | Silicon oil | | | | | | |
| | | | Cabin Filter Cover | | | | | | |
| | 1 | | Frt Seat LH Reclining Cover | | | | | | |
| | | | Center Cap | | | | | | |
| | | | Side Stepboard RH (genuine) | | | | | | |
| | | | Shackle Bushing | 1 1 | | | | | |
| pprov | ed Budget | for the C | Contract: Php 125,000.00 | Note: | | | | | |
| nd Use | | GSMS | | "Bidder's Specific | "Bidder's Specifications" column may be filled up with service provider or ma | | | | |
| PURPOSE : | . I | Preventive Maintenance Services of DSWD Service Vehicle, ISUZU (DMAX) with Plate No. SAB 4901 | | | | | | | |
| | | No. SAB 4901 Interprocedure in accordance with DSWD-Memorandum Circular No. 2, Series of 2007. | | | | | | | |

BOYS PALTE D. CASEÑAS II

Signature of Supplier / Authorized Representative Over Printed Name

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