DSWD

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
Field Office VII
Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION
SMALL VALUE PROCUREMENT

RFQ No. : **DSWD7-2025-1084**
Date   : **July 11, 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** in accordance with Implementing Rules and Regulations of Republic Act 12009. Failure to indicate required information/s 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 or service provider/s is/are required to submit true copies of **valid Business/Mayor's Permit, Philgeps Registration Number,** and **Latest Income Tax Return** upon submission of the 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; 232-0261; 231-2172 local 17140 or 17110 or e-mail to bac.fo7@dswd.gov.ph on or before **July 15, 2025 at 5:00PM.**

Very truly yours,

ENGR. EMMANUEL M. EDLES
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 **5 days after the receipt and conformity of Purchase Order.**
4. Place of Delivery: **DSWD-NIR, Brgy. Talay, Dumaguete 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**
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 quote and agree to the terms and conditions.

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

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DSWD
Department of Social Welfare and Development

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

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

RFQ No.: DSWD7-2025-1084
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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
			Supply, Delivery and Installation of Furniture and Fixtures				
1	40	piece	**Office Chair** with lumbar support side chair without wheels (Black) (see attached image/picture for reference)				
2	48	set	**Office Cubicle** - Table top 1200 mm (L) x 600 mm (W) x 25 mm (Thick) - 42mm Partition thickness - with Glass in stripe line - 1050mm Height Melamine Partition Wall in Black Aluminum Framing - Cable management: Bottom Raceway - Color: Kano Grey - King walnut - Black aluminum (see attached image/picture for reference)				
3	66	piece	**Clerical Chair** - ergonomic with armrest, gas-lift and tilting mechanism - adjustable headrest - high density foam in mesh fabric upholstery - chrome coated metal base with caster - Dim: W60 x D62 X H120-128 cm - Color: Black (see attached image/picture for reference)"				
			Place of Delivery: DSWD NIR, Talay, Dumaguete City				
Total:							

Approved Budget for the Contract: **Php 1,543,000.00**	"Bidder's Specifications" column may be filled up with service provider or may copy "Articles/Description" stated or may state brand, model and country of origin of item offered, if applicable.
End User: **DSWD NIR**	
PURPOSE : For Field Office - NIR repair and improvement	

CHARL ALBERT J. TORREFIEL
CHARL ALBERT J. TORREFIEL
Canvasser

_____
Signature of Supplier / Authorized
Representative Over Printed Name

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Item # 1 Reference Picture

Item # 2 Reference Picture

Item # 3 Reference Picture