



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. : DSWD7-2025-1085

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** 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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PhilGEPS Registration No.: _____
Tin Number: _____

Item No.	Quantity	Unit of Measure	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
			Supply of Materials, Delivery and Installation of Horizontal Composition Cabinet				
1	4	unit	Specification: 1 layer cabinet Material: Made from Angle Bar and Plywood Dimension: 305 x 50 x 40cm, approx. Color: Classic Mahogany Brown Place of Delivery: DSWD NIR, Talay, Dumaguete City				
Total:							
Approved Budget for the Contract: Php 160,000.00				"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 the office improvement of Field Office Negros Island Region.							

CHARL ALBERT J. TORREFIEL
Canvasser

Signature of Supplier / Authorized Representative Over Printed Name

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