

DSWD DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Department of Social Welfare and Development Corner M.J. Cuenco and Gen. Maxilom Ave., Cebu City

REQUEST FOR QUOTATION NP - SMALL VALUE PROCUREMENT

	RFQ No. : <u>DSWD7-2021-</u> 0156
Company Name	Date : February 4, 2021
Company Address	
Company Address : Contact Person :	
Contact No. :	
No.	
PhilGEPS Registration No.:	
Sir/Madam:	
Please quote your government price/s including delivery expenses for the goods listed in Annex A. Failure to indic kindly furnish us with descriptive brochures, catalogues, li	charges, VAT or other applicable taxes, and other incidental ate information could be the basis for non-compliance. Also, teratures and/or samples, if applicable.
If you are the exclusive manufacturer, distributor or agen attach in your quotation/s a duly notarized certification to the	t in the Philippines for the goods listed in Annex A , please his effect.
Interested supplier/s are required to submit true copies of Number , Omnibus Sworn Statement for ABC for above Pl Php500,000.00 upon submission of quotation/s.	np50,000.00,and latest Income Tax Return for ABC above
Please accomplish and submit this form together with DSWD Field Office VII, Cebu City or send it through facsin or 148 or e-mail to bac.fo7@dswd.gov.ph on or before Feb	Annex A and Bank Information to the BAC Secretariat, nile numbers (032) 233-8785; 232-0261; 231-2172 local 140 oruary 10, 2021 at 5:00pm.
	Very truly yours,
	ROSARIO P. BACONG I. AO V/Head, Procurement Management Section
Terms and Conditions:	genient Goodon
 Award shall be made on per: item basis v Quotation validity shall be not less than 60 calendar day 	otal quoted price lot basis
3. Good/s or Services shall be performed for a period of 3 r4. Place of Delivery: DSWD Field Office VII and CIS Building /	months at every 7 days interval.
5. Terms of Payment: within 30 calendar days from the	receipt of Billing Statement / Sales Invoice
o. Elquidated Dalliages/Fenalty: One-tenth of one perc	ant for average of 1.1
and i	unit price for the item as extended or multiplied
by the quantity of that item, the latter shall prevail. 8. Warranty Period, if applicable:	
	LEIF WAYNE YOUNG
I am interested to quote and agree to the terms and condition	Canvasser
and condition	ons.
(Signature over Printed Name of Supplier / Authorized Representative)	
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POPURATION OF SOCIAL WELFARE AND DEVELOPMENT PROPURATION OF SOCIAL WELFARE AND DEVELOPMENT POPURATION OF SOCIAL WELFARE AND DEVELOPMENT

PhilGEPS Registration No.	Contact No.	Contact Person	Company Address	Company Name

No. Qty.	Unit	Articles / Descriptions	Statement of Compliance (State "Comply" or "Not Comply")	Bidder's Specifications	Unit Cost	Total Cost
		Sanitation and Disinfection Services				
-	2	Specifications:				
	T.	opecifications:				
	* * * * * * * * *	* Building and grounds - estimated floor area: ±4,300 sq.m. * Including 15-units DSWD vehicles * Service provider must be a licensed Pest Control Operator issued by the National Committee on Urban Pest Control (NCUPC) accredited by the Philippine Federation of Pset Management Operators Assn. (PFPMOA) and recognized by food and drugs Administration (FDA) * Must sanitize and disinfect all areas / concerns of the compound by misting or residual spraying Perform inspection on strategic areas of the structure and provide recommendations to facilitate speedy control Must perform treatment at every 7 days interval for a period of 3 * Must perform treatment in accordance with Center for Disease Control (CDC) * may submit periodic reports indicating the findings and recommendations for the structure contracted				

			mic	Sanitization and disinfection services for precautionary measures in response to COVID-19 pandemic		Purpose :
	-	applicable.		IN	er: ADMIN	End User:
tion" stated if	Articles/Descript	offer (brand, model, origin) or may copy "Articles/Description" stated if	offer (brand, model,		0.	Charge to
ith supplier's	av he filled up w	Note: "Bidder's Specifications" column may be filled up with supplier's	Note: "Bidder's Spe	Approved Budget for the Contract: Php 120,000.00	d Budget t	Approve
				DSWD Field Office and CIS Building /Compound		
				month interval or after all service conducted.		
				Payment maybe made every after submission of billing on a		
				Payment:		
				 Mediclean (Isopropyl alcohol) Viralclyde (Glutaraldehyde, quarternary ammonium salt) 		
				Solve (Botanical extract) Bestaguam (Didecyl dimethyl ammonium bromide)		
				* Preferrably sny two (2) of the following:		
				buildings/offices that can eliminate viruses and bacteria		
				* Chemicals that are preferrably fit for interior and exterior		
				disinfectant		
				* Must be colorless, odorless, non-corrosive and non-toxic		
				of surfaces		
				solution that deodorizes disinfects and removes grease from all type		
				* All phomical to be used must be 4000/ paragraphs		1
				Chemical:		
Total Cost	Unit Cost	Bidder's Specifications	Statement of Compliance (State "Comply" or "Not Comply")	Unit Articles / Descriptions	Qty.	Item No.
						-

Signature of Supplier / Authorized Representative
Over Printed Name

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

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Cahvasser