



**REQUEST FOR QUOTATION**  
**NP- SMALL VALUE PROCUREMENT**

RFQ No. : DSWD7-2021- 0440  
 Date : April 6, 2021

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 supplier/s are required to submit true copies of their valid **Mayor's Permit, Philgeps Registration Number, Omnibus Sworn Statement** for ABC above Php50,000.00, and **Latest Income Tax Return** for ABC above Php500,000.00 upon submission of quotation/s.


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 **April 13, 2021 at 5:00 pm**.

Very truly yours,

  
**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 within April to Decwmbler 2021.
4. Place of Delivery: AVRC, Camomot Cmpound, Franza St., Labangon , Cebu City
5. Terms of Payment: **within 30 calendar days from the receipt of Billing Statement / Sales Invoice.**
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: \_\_\_\_\_

  
**LEIF WAYNE P. YOUNG**  
 Canvasser

I am interested to quote and agree to the terms and conditions.

\_\_\_\_\_  
 (Signature over Printed Name of Supplier /  
 Authorized Representative)


**DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT**  
 Department of Social Welfare and Development  
**Field Office VII, Cebu City**

RFQ No.: DSWD7-2021- 0440  
 Date: April 6, 2021

Company Name \_\_\_\_\_  
 Company Address \_\_\_\_\_  
 Contact Person \_\_\_\_\_  
 Contact No. \_\_\_\_\_  
 PhilGEPS Registration No.: \_\_\_\_\_

| Item No. | Qty. | Unit | Articles / Descriptions   | Statement of Compliance (State "Comply" or "Not Comply") | Bidder's Specifications | Unit Cost | Total Cost |
|----------|------|------|---|--|-------------------------|-----------|------------|
| 1        | 1    | lot  | <b>SANITATION AND DISINFECTION SERVICES</b><br><br>Specification:<br>* building/ ground location & area:<br><b>HFG/RSCC Compound/Buildings = ±4,000 sq.m</b><br>* HFG Admin & Infirmary Building, Old Dormitory, Kitchen, Dormitory & Productivity Skills Building, Covered Court, Display Center, Guardhouse<br>* RSCC Old and New Building with ramp, Guardhouse<br><b>AVRC Compound/Buildings = ±4,180 sq.m.</b><br>* AVRC II Main Building (New/Old), Multi-purpose Building, Canteen, Guardhouse, Covered Court<br><b>HAVEN Compound/Buildings = ±1,250 sq.m.</b><br>* RHW Old and New Building, Kitchen/Dining Area, Storage room, Kiosk, Guardhouse<br><b>Regional Warehouse - Annex =±950 sq.m</b><br>* Regional warehouse building with mezzanine  |  |                         |           |            |
|          |      |      | * Including 7-units DSWD vehicles<br>* Services Provider must be a Licensed Pest Control Operator issued by the National Committee on Urban Pest Control (NCUPC), accredited by the Philippine Federation of Pest Management Operators Assn. (PFPMOA) and recognized by Food and Drugs Administration (FDA)<br>* must sanitize and disinfect all areas/concerns of the compound by misting or residual spraying<br>* perform inspections on strategic areas of the structure and provide recommendations to facilitate speedy control<br>* must perform treatment at every 7 days interval for a period of 9 months (or 39 weeks)<br>* must perform treatment in advance of the scheduled period if necessary upon request of the Procuring Entity or its authorized person<br>* must perform treatment in accordance with Center for Disease Control (CDC)<br>* may submit periodic reports indicating the findings and recommendations for the structure contracted |  |                         |           |            |

| Item No.  | Qty. | Unit | Articles / Descriptions | Statement of Compliance<br>(State "Comply" or<br>"Not Comply") | Bidder's Specifications | Unit Cost | Total Cost |
|---|------|------|-------------------------|--|-------------------------|-----------|------------|
| <p>Approved Budget for the Contract: <b>Php 715,000.00</b></p> <p>End User: <b>ADMIN</b></p>  |      |      |                         |  |                         |           |            |
| <p>Purpose : Sanitation and Disinfection services for precautionary measures in response to COVID-19 Pandemic</p> <p>Note: "Bidder's Specifications" column may be filled up with supplier's offer (brand, model, origin) or may copy "Articles/Description" stated if applicable.</p>  |      |      |                         |  |                         |           |            |
| <p><b>CHEMICAL:</b></p> <ul style="list-style-type: none"> <li>* All chemicals to be used must be 100% organic, multi-purpose solution that deodorizes, disinfects and removes grease from all types of surfaces</li> <li>* Must be colorless, odorless, non-corrosive and non-toxic disinfectant</li> <li>* Chemicals that are preferably fit for interior and exterior buildings/offices that can eliminate viruses and bacteria</li> <li>* <b>Preferably any two(2) of the following:</b> <ol style="list-style-type: none"> <li>1.) Isoleve (Botanical extract)</li> <li>2.) Bestaquam (Didecyl dimethyl ammonium bromide)</li> <li>3.) Mediclean (Isopropyl alcohol)</li> <li>4.) Viraloyde (Glutaraldehyde, quaternary ammonium salt)</li> </ol> </li> </ul> <p><b>Payment:</b><br/>Payment maybe made every after submission of billing on a month interval or after all services conducted</p> <p><b>Location:</b><br/>Home for Girls (HFG), Reception and Study Center for Children(RSCC) Area Vocational Rehabilitation Center II (AVRC II), and Regional Haven for Woman (RHW) Buildings/Compound at Labangon, Cebu City</p> |      |      |                         |  |                         |           |            |

Signature of Supplier / Authorized Representative  
Over Printed Name

  
**ELF WAYNE P. YOUNG**  
Canvasser