

DRN:

End-User: AICS

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT FIELD OFFICE V
Regional Government Center, Rawis, Legazpi City, Albay
REQUEST FOR QUOTATION

Company Name _____ P.R. No. NF 2308-0685
 Company Address _____ Date: September 18, 2023
 Contact No. _____ MOP _____
 PhilGEPS Certificate No. _____ TIN NO. _____
Sec.53.9 Small Value Procurement

Please quote your lowest government price for the following item(s) specified below. Check/tick the "COMPLY" box if bidder complies with the specifications. A quotation containing unchecked/unticked "COMPLY" boxes would be automatically rated as "FAILED".

ITEM NO.	QTY.	UNIT	ITEM DESCRIPTION AND SPECIFICATIONS	Kindly tick the box to signify compliance to the specs.	UNIT COST	TOTAL COST
			BUS RENTAL FOR THE ASSESSMENT AND PAYOUT FOR BAGONG PILIPINAS CARAVAN ON SEPTEMBER 23-24, 2023			
	1	unit	Albay to Camarines Sur @ 1 bus for 2 days (Legazpi to Nabua vice-versa)	<input type="checkbox"/> comply	P	P
	1	unit	Camarines Sur @ 1 bus for 2 days (Naga, Sipocot, Libmanan, Pili and Nabua vice-versa)	<input type="checkbox"/> comply	P	P
			Requirements/Inclusion:			
			Driver	<input type="checkbox"/> comply		
			At least 45 seater	<input type="checkbox"/> comply		
			Airconditioned	<input type="checkbox"/> comply		
			Gasoline, food and accommodation of the driver	<input type="checkbox"/> comply		
			Vehicle certificate of public conveyances (to avoid colurum)	<input type="checkbox"/> comply		
			With professional driver's license (not expired)	<input type="checkbox"/> comply		
			ABC: Php 60,000.00			

IMPORTANT REMINDERS:

- Price quotation/s must be valid for a period of _____ calendar days from the date of submission.
- DELIVERY PERIOD: _____ Calendar days upon receipt of Purchase Order (PO)
- PLACE OF DELIVERY: _____
- The Project shall be **AWARDED** as follows: _____ (a) as one contract _____ (b) separate contracts per lot _____ (c) separate contracts per item
- TERM OF PAYMENT: **CHARGED ACCOUNT**, unless specified.
- LIQUIDATED DAMAGES: **One-Tenth Of One Percent (0.001) of the cost of the unperformed portion of the contract for every day of delay.** Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the DSWD FOV **may rescind or terminate the contract**, without prejudice to other courses of action and remedies available under the circumstances.
- Required documents to submit:
 a. PhilGEPS Certification Number b. Valid Mayor's or Business Permit c. Latest Income Tax Return
- As a condition for **AWARD**, you will be required to submit the following documents:
 a. _____ b. _____
- For any clarifications, you may contact the BAC Secretariat at procurement.dswd5@gmail.com or at **0910-017-0818**.
- Submit your quotation duly signed by you or your duly authorized representative not later than the deadline on 9/22/2023 9:00 am.

JUDEX DONNEL G. LLAMOSO
BAC Chairperson

Signature over Printed Name of Canvasser

Signature over Printed Name of Bidder/Authorized Representative