

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

Company Name _____
 Company Address _____
 Contact No. _____
 PhilGEPS Certificate No. _____

P.R. No. **NF 2401-0061**
 Date: **February 12, 2024**
 MOP: **LEASE OF REAL PROPERTY AND VENUE**
 TIN: _____

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 CHECK to signify compliance to the specs.	UNIT COST	TOTAL COST
			RENTAL OF OFFICE SPACE FOR KC NCDDP CAMARINES SUR FOR CY 2024			
1	9	months	Office Rental for April - December 2024			
			Requirements:			
			Preferably within Naga City, Camarines Sur	<input type="checkbox"/> Comply		
			Flood free and is accessible	<input type="checkbox"/> Comply		
			106 square meters including warehouse, conference area, pantry and comfort room	<input type="checkbox"/> Comply		
			With at least 8 convenient outlets	<input type="checkbox"/> Comply		
			Must have clear ceiling height from finished to floor line and sufficient number of operable windows;	<input type="checkbox"/> Comply		
			Must have sufficient number of lighting fixtures and accessible lighting switches (working & in safe condition)	<input type="checkbox"/> Comply		
			With provision of airconditioning unit	<input type="checkbox"/> Comply		
			Preferably free usage of in-house generator set	<input type="checkbox"/> Comply		
			Preferably with free night and day security guard on duty	<input type="checkbox"/> Comply		
			With fire exit	<input type="checkbox"/> Comply		
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			Approved Budget for the Contract:		PHP 585,000.00	

IMPORTANT REMINDERS:

- Price quotation/s must be valid for a period of ____ days from the date of submission.
- DELIVERY PERIOD: As specified in the Purchase Order**
- PLACE OF DELIVERY: As specified in the Purchase Order**
- 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:
 - PhilGEPS Certification Number
 - Valid Mayor's or Business Permit
 - Latest Income Tax Return
- As a condition for AWARD, you will be required to submit the following documents:
 - Omnibus Sworn Statement
 - _____
- For any clarifications, you may contact the BAC Secretariat through **fo5kcprocurement@gmail.com** or **0910-017-0818**
- Submit your quotation duly signed by you or your duly authorized representative not later that the deadline on _____

JUDEX DONNEL G. LLAMOSO
 BAC & Procurement Head

 Signature Over Printed Name of Canvasser

 Signature Over Printed Name of Bidder