Chelsea

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
IBP Road, Constitution Hills, Quezon City

REQUEST FOR QUOTATION

RFQ No. **21-0176 SHOPPING (b)**
Date: **March 18, 2021**

Company Name : ____________________
Company Address : ____________________
Contact Person : ____________________
Contact No. : ____________________
PhilGEPS Reg. No.: ____________________
Company TIN: ____________________

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 basis for non - compliance. Also, 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.

As a condition for payment, you will be required to submit your Mayor's/Business Permit. The Certificate of Platinum Membership may be submitted in lieu of the Mayor's/Business Permit and PhilGEPS Registration Number.

Please accomplish and submit this form together with Annex A and all the required documents to DSWD -BAC Secretariat at 2nd Floor Mahusay Building, DSWD Central Office, IBP Road, Constitution Hills, Quezon City or **fax it through numbers 8951-7116** or **email to quotations@dswd.gov.ph not later than 1:00 PM of March** 24 **, 2021** (Friday). **Quotations submitted to different fax number(s) or email address(es) as stated above shall not be considered for evaluation.**

Department of Social Welfare and Development
BAC SECRETARIAT, PPMD-PROCUREMENT SERVICE
POSTED
MAR 23 2021
POSTED by: Chelsea

Very truly yours,

WILLIAM V. GARCIA, JR.
Officer-In-Charge, Procurement Planning & Management Division

Terms and Conditions:

1. Award shall be made on per: ☐ Item Basis ☐ **Total Quoted Price** ☑ Lot Basis
2. Quotation validity shall be **Sixty (60) calendar days from the deadline of submission of quotations.**
3. Good/s shall be delivered within **Refer to Annex A for the detailed delivery schedule.**
4. Place of Delivery: **DSWD-Central Office, PSAMD Warehouse, IBP Road, Constitution Hills Q.C.**
5. Terms of Payment: **within 15-30 days upon completion of supporting documents.**
   Payment through **LDDAP-ADA (List of Due and Demandable Accounts Payable-Advise to Debit Account).**
   Account Name : ____________________ **Account Number :** ____________________
   BankName : ____________________ **Branch :** ____________________
   ***Note: Non Land Bank of the Philippines accounts shall be charged a service fee.**
6. Liquidated Damages/Penalty: **In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.**
7. For goods, please indicate brand, model and country of origin.
8. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
9. Please indicate Warranty: ____________________
10. In case of a tie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.
11. **NOTE:** "Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free."

RODEL D. TORRATO
Procurement Officer
Tel. Nos. 8931-6139/ 8931-8101 to 07 Voip 10093 and 10097

____
(Signature over Printed Name)
Supplier

Procurement Form No. 04-A (Annex A)

Annex A

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

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LOT	Qty.	Unit	Purchaser's Specifications	Unit Cost	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
1	12	Cartridge	INK CART, HP CZ107AA, (HP678), Black	500.00			
	12	Cartridge	INK CART, HP CZ108AA, (HP678), Tricolor	500.00			
	1	Cartridge	Toner Cartridge, HP CF280A, LaserJet Pro M401/M425	5,500.00			
	4	Cartridge	Toner Cartridge, HP CF400A, (HP201A) Black LaserJet	4,000.00			
	4	Cartridge	Toner Cartridge, HP CF401A, (HP201A) Cyan LaserJet	4,043.83			
	4	Cartridge	Toner Cartridge, HP CF402A, (HP201A) Yellow LaserJet	4,043.83			
	4	Cartridge	Toner Cartridge, HP CF403A, (HP201A) Magenta LaserJet	4,500.00			
			Delivery Terms: 15-20 working days upon receipt of PO				
			Approved Budget for the Contract (ABC): PhP 83,850.64				
2	10	Bottle	HAND SANITIZER, 500 ml, Alcohol-based (isopropyl/ethyl alcohol/n-propanol 60%-95%), or Alcohol free- using povidoneiodine, benzalkonium chloride or triclosan), Hypoallergenic, NonDrying, Pump dispenser plastic	151.43			
	10	Can	DISINFECTANT SPRAY, aerosol type, 400-550 grams	450.00			
	2	Bundle	RAGS, all cotton, 32 pieces per, kilogram min	100.00			
	50	Piece	FACE SHIELD, Transparent Thick Plastic Replaceable Shield with Comfortable Fitting Glasses Type Frame	124.08			
	600	Piece	SURGICAL MASK, Surgical, Disposable, Ear loop, 3-ply, Wired	14.05			
	100	Piece	KN95 FACE MASK, Disposable, Respirator, Unvalved, Seamless, headband	104.00			
			Delivery Terms: 10 working days upon receipt of PO				
			Approved Budget for the Contract (ABC): PhP 31,248.30				

PURPOSE : **Office Supplies of OUS-GASSG for the 1st quarter for the CY 2021**

PR No. **01-20001-PR-2021-02-00161**

IMPORTANT : The winning bidder MUST SIGN the original copy of Purchase Order (P.O.) at DSWD-Central Office, Procurement Management Service. FAILURE to show up and sign the original P.O. means that the bidder is not interested and will be a ground for suspension or blacklisting in DSWD's future biddings.

RODEL D. TORRATO
Procurement Officer
Trunkline: 89318101 to 07 Voip 10093 and 10097
Fax No. 8951-7116

____
(Signature over printed name)
Supplier

DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

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LOT	Qty.	Unit	Purchaser's Specifications	Unit Cost	Bidder's Specifications (Please fill out the detailed specifications in the space provided)	Unit Cost	Total Cost
3	10	Pad	NOTE PAD, stick on, 50mm x 76mm (2" x 3") min, 100 sheets/pad	50.00			
	10	pad	NOTE PAD, stick on, 76mm x 100mm (3" x 4") min, 100 sheets/pad	80.00			
	10	Pad	NOTE PAD, stick on, 76mm x 76mm (3" x 3") min, 100 sheets/pad	60.00			
	50	ream	PAPER, Multi-Purpose (COPY) A4, 70 gsm	200.00			
	5	Book	RECORD BOOK, 500 PAGES, size: 214mm x 278mm min	150.00			
	20	Pack	BATTERY, dry cell, AA, 2 pieces per blister pack	100.00			
	20	Pack	BATTERY, dry cell, AAA, 2 pieces per blister pack	100.00			
	10	Box	STAPLE WIRE, STANDARD, (26/6), 5000 wires/box	50.00			
	4	Roll	TAPE, MASKING, width: 24mm (±1mm)	60.00			
	4	Roll	TAPE, PACKAGING, width: 48mm (±1mm)	40.00			
	10	Box	PAPER CLIP, vinyl/plastic coat, length: 32mm min	15.00			
	15	Box	CLIP, BACKFOLD, all metal, clamping: 19mm (-1mm), 12pcs/box	15.00			
	2	Piece	STAMP PAD, FELT, bed dimension: 60mm x 100mm min	50.00			
	5	Piece	SCISSORS, symmetrical, blade length: 65mm min	100.00			
	10	Piece	SIGN PEN, BLACK, liquid/gel ink, 0.5mm needle tip	34.61			
	24	Piece	SIGN PEN, HIGHTECH PEN BLUE, rollerball pen, 0.7mm	65.00			
	24	Piece	SIGN PEN, HIGHTECH PEN BLUE, rollerball pen, 0.5mm	49.00			
			Delivery Terms: 10 working days upon receipt of PO				
			Approved Budget for the Contract (ABC): PhP 21,607.10				

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