Republic of the Philippines DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Cordillera Administrative Region 40 North Drive, Bagulo City

REQUEST FOR QUOTATION (RFQ)

| | | REQUEST FOR GOOTATION | | | | | | |
|-------------------|-------------|--|--|--|--|--|--|--|
| | | RFQ No.: | 2024-10-1063 | | | | | |
| PR/PP No.: | 2024-10-763 | | OCT 2 2 2024 | | | | | |
| | | Date. | ₱56,000.00 | | | | | |
| End-user: | | ABC: | P 30,000 / C | | | | | |
| Name of | Project: | OUTSOURCING OF TRANSPORTATION SERVICES FOR THE IMPLEMENTATION OF DRMD PROGRAM FOR 2024- APAYAO | | | | | | |
| | | Mode of Procurement: | SMALL VALUE PROCUREMENT | | | | | |
| Sir/Ma | dam: | uote your lowest price on the item/s described below inclusive of taxes duly signed by you | or your authorized representative, | | | | | |
| 1: 1 to the Torms | | uote your lowest price on the item/s described below inclusive of taxes duly signed by you and Condition provided in this RFQ and submit personally to the Office of the Procurement bacsec.car@dswd.gov.ph on or before | t Section, 40 North Drive, Baguio City | | | | | |
| Of tillo | 2811 | | RINA CLAIRE L. REYES | | | | | |
| | | | BAC Chairperson | | | | | |

TERMS AND CONDITIONS:

- Quotations in excess of the ABC will be REJECTED.
- 2. For total quoted price, quotations with a dash or zero shall be deemed free of charge.
- 3. All entries must be typewritten/printed/longhand. Any erasure in the quotation must be countersigned by the bidder/representative, otherwise quotation will be rejected.
- 4. The Procuring Entity may give due preference to goods being offered with green component.
- 5. If necessary, the BAC through the TWG, may require an occular inspection of the venue/place of business/goods being offered.
- 6. Delivery of Goods / Services is as indicated in the next page.
- 7. Price validity shall be for a period of 120 calendar days from RFQ Opening of the BAC until confirmation of Purchase Order by the winning supplier.
- 8. The following documents shall be attached upon submission of quotation, otherwise your quotation will not be accepted, please disregard if already submitted:
 - a. Updated Mayor's / Business Permit
 - b. PhilGEPS Registration Certificate or PhilGEPS Registration Number to be indicated in space below (except for
- o Income/Business Tax Return (for Small Value Procurement, Direct Contracting above P500K, Emergency Cases above P500K, and Lease of Real Property/Venue).
 - o Official Receipt or Invoice (as applicable) issued by BIR (a mere picture of the receipt can suffice)
- 9. Where there is discrepancy between: (a) total price per item and unit price for the item as extended or multiplied by the quantity of that item, the unit price shall prevail; (b) stated total price and the actual sum of prices of component items, the lower shall prevail; (c) unit cost in the detailed estimate and unit cost in the bill of quantities, the latter shall prevail.
- 10. Suppliers/Contractors who refuse to accept correction of price offer after Bid Evaluation shall be disqualified.
- 11. Award of Contract shall be made to the Lowest Calculated Responsive Quotation (LCRQ) that complies to the technical specifications and the terms and conditions stated herein.
- 12. The BAC shall require the bidder with Lowest Calculated Responsive Quotation (LCRQ) to submit the Omnibus Sworn Statement prior to issuance of Award / Purchase Order with ABC amounting to P500,000.00 for Emergency Cases and P50,000.00 above for Small Value Procurement.
- 13. Upon approval of the Purchase Order (PO), the Procurement Section may send or forward the approved PO for confirmation to the winning bidder. The approved PO shall be confirmed within three (3) calendar days upon sending the approved PO to the winning bidder's officially registered email address or upon notification of the winning bidder that the approved Purchase Order is available for confirmation. Failure to submit the confirmed PO within the 3-day period may cause the automatic cancellation of the PO.
- 14. If the Supplier fails to deliver the required goods /services as specified in the Award / Purchase Order, the Procuring Entity may disqualify bidder from participating future procurement activities to be conducted by DSWD-CAR.
- 15. Liquidated damages equivalent to one tenth of one percent (0.001) of the value of the goods not delivered within the prescribed delivery period may be imposed per day of delay. The Procuring Entity (PE) may rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.
- 16. Further information may be obtained from the Procurement Section with telephone number (074) 661-0430 local 25123 or email address bacsec.car@dswd.gov.ph.

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| | | REQUEST FOR QUO | TATION (RFQ | | | | | | | |
|-------------|---|---|--|-----------------|------------------|------------------------|-----------------------------|--|--|--|
| ITEM NO. | | DETAILED DESCRIPTION | NO. OF VEHICLE NEEDED PER DAY | NO. OF | UNIT | r PRICE | TOTAL | | | |
| 1 | OUTSOURCING OF T | RANSPORTATION SERVICES FOR THE IMPLEMENTATION OF DRMD PROGRAM FOR 2024- APAYAO | | | | | | | | |
| | Required Vehi | PAYAO(various Municipalities) vice versa e: October 2024 (3 days) December 2024 (4 days) cle: VAN/ SUV, At least fifteen (15) seater for the van and at eater for the SUV | 1 | 7 | | | | | | |
| | TOTAL PRICE | | | | | | | | | |
| | | OTHER REQUIREMENTS | | | | Cannot Comply | REMARKS | | | |
| | | historyear model must be at least 2017 and up | | | | [] | | | | |
| | | ehicle year model must be at least 2017 and up | | | | [] | | | | |
| | Fully air con | Fully air conditioned/ordinary Attach up to date OR, CR, Driver's License, Certificate of Public Convenience or Provisional [] | | | | | | | | |
| | Authority for | | | | | | | | | |
| | Fuel food a | and lodging of the drivers will be handled by the service p | rovider | | | [] | | | | |
| | Schedule o | Schedule of travel and destination can be moved/changed and shall be coordinated with the supplier 1 or 2 days before the travel date at any given time during emergencies/disaster wherin immediate need of the vehicle will be observed | | | | | | | | |
| | | ould be well familiar with road terms | | | | [] | | | | |
| | Service Vehicles must be regularly sanitized/ disinfected before and after each travel with ready available alcohol or sanitizer. Should maintain physical distancing and ensure that the driver and passengers wear face masks throughout the travel | | | | | | | | | |
| | Sonice pro | Service provider must ensure to provide vehicle that is in good condition and fully equipped with basic tools, spare tires and fire extinguisher. | | | | | | | | |
| | to the appropriate of Luzon | | | | | [] | | | | |
| | Availability | Availability of First Aid Kit with the necessary medical paraphernalia and accessories to see. | | | | | | | | |
| | | Charges will be based on the actual days of travel | | | | | 1 | | | |
| _ | | s equivalent to 24 hours | | | | [] | | | | |
| | Place of travel is not limited to only one destination for 1 day | | | | [] | | | | | |
| | Service Provider must have Active Landbank Account for Payment Purposes. For other banks, service charge will be deducted upon payment on the account. | | | | | | | | | |
| | | PAYMENT SHALL BE MADE THRU LANDBANK OF THE PHILIPPINES | | | | | | | | |
| | | a Award shall be made per: Item Bas x Lot Basis | | | | | | | | |
| Note: j | NO GIFT ALLOWE rs at no costs, wa | D. Pursuant to RA 6713, otherwise known as the Code of Conduct and live any therein and accept the offer most advantageous to the governing. | Ethical Standards ment. | for Public Offi | cials and Employ | iees. The DSWD reserve | s the right to reject drift | | | |
| Sir: | Λ 64 | er having carefully read and accepted your terms and c | conditions, I / \ | We submit | our bid on th | ne item/s quoted a | bove. | | | |
| | AIL | Name (| of Firm/Deale | /Contracto | or: | | | | | |
| | Office Address: | | | | | | | | | |
| | | Owner's/Proprietor/President's Name and Signature: | | | | | | | | |
| | | , | | | - | | | | | |
| | | Contact Number/s: | | | | | | | | |
| | | Email Address: For Authorized Representative, kindly indicate the following: | | | | | | | | |
| | | Name and Signature: | | | | | | | | |
| | Contact Number/s: PhilGEPS Registration Number: | | | | | | | | | |

MEL/cj

Name and Signature of Canvasser