

## PURCHASE ORDER

Department of Social Welfare and Development  
Cordillera Administrative Office

Annex G-5

|                 |   |                            |             |
|-----------------|---|----------------------------|-------------|
| <b>Supplier</b> | SAGADIAN TOURIST TRANSPORT COOPERATIVE                | <b>Purchase Order No.</b>  | 2021-05-191 |
| <b>Address</b>  | 37 LOWER TACAY RD., ZARATE VILL., GUISAD, BAGUIO CITY | <b>Date</b>                | 5/12/2021   |
|                 |   | <b>Mode of Procurement</b> | SVP         |

Gentlemen:

Please furnish this office the following articles subject to the terms and conditions herein.

| <b>Place of Delivery</b>   |      | AS INDICATED  | <b>Delivery Term:</b> | Complete     |                  |
|--|------|---|-----------------------|--------------|------------------|
| <b>Date of Delivery</b>  |      | AS SCHEDULED  | <b>Payment Term:</b>  | Charge       |                  |
| Stock/<br>Property   | Unit | Description   | QTY                   | Unit<br>Cost | Total<br>Cost    |
|  |      | <b>HIRE OF VEHICLE FOR THE REGIONAL SYSTEMS CONFERENCE</b>  |                       |              |                  |
|  | day  | VAN: (7 Units )<br>can accommodate 7 passengers including the driver<br>Places of travel: within San Juan, La Union<br>Dates of Delivery of Services is on:<br>May 17, 2021: Field Office to Venue (7 van)<br><br>May 20, 2021: Venue to Field Office (7 van) | 14                    | 5,450.00     | 76,300.00        |
| <b>OTHER REQUIREMENTS</b>  |      |   | <b>COMPLIANCE</b>     |              |                  |
| Service vehicle must be EURO 4 compliant and year model is preferably at least 2016 and up with comprehensive insurance.   |      |   | ✓                     |              |                  |
| Service provider can provide enough vehicles for simultaneous travels supported with OR, CR and valid certificate of Public Convenience (CPC) for each vehicle   |      |   | ✓                     |              |                  |
| Service vehicle must be in good condition, air- conditioned and fully equipped with basic tools, spare tires and fire extinguisher.  |      |   | ✓                     |              |                  |
| Availability of First Aid Kit with the necessary medical paraphernalia and accessories for each vehicle  |      |   | ✓                     |              |                  |
| 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  |      |   | ✓                     |              |                  |
| Schedule of travel may be subject to change and will be communicated at least 7 days before the actual date of travel  |      |   | ✓                     |              |                  |
| All drivers scheduled to travel should be subjected to a Swab Test within three (3 days) before travel and drug test. The swab test result or medical certificate, drug test result and all the necessary travel pass should be submitted before the scheduled travel. The service provider shall shoulder the cost of swab test and other travel documents. |      |   | ✓                     |              |                  |
| Service Provider can provide standby driver with all required travel pass and health clearances at any given time.   |      |   | ✓                     |              |                  |
| Drivers should be well familiar with road terms, routes, and places of travel pass and health clearances at any given time.  |      |   | ✓                     |              |                  |
| Fuel, food and lodging of the drivers will be handled by the service provider  |      |   | ✓                     |              |                  |
| Transparent protective shield be installed at the driver's side  |      |   | ✓                     |              |                  |
| Charges will be based on the actual days of travel   |      |   | ✓                     |              |                  |
| Price proposal should not exceed the ABC, otherwise it will be a ground for disqualification of bid.   |      |   | ✓                     |              |                  |
| Coordination of travels will be centrally managed by the General Services Section  |      |   | ✓                     |              |                  |
| Mode of payment: Payment may be processed on monthly basis based on the actual accumulated travels per month   |      |   | ✓                     |              |                  |
| The procuring entity reserved the right to reschedule and cancel or shorten the travel for any justifiable reasons or for any circumstances beyond the procuring entity's control, i.e. force majeure, fortuitous event, etc.  |      |   | ✓                     |              |                  |
| With permit to travel to any point of Luzon.   |      |   | ✓                     |              |                  |
|  |      |   |                       | <b>TOTAL</b> | <b>76,300.00</b> |
| <b>(Amount in words)</b>   |      | <b>Seventy Six Thousand Three Hundred Pesos Only</b>  |                       |              |                  |

In case of failure to make the full delivery within the time specified above, a penalty of one-tenth (1/10) of one percent for every day of delay shall be imposed on the undelivered item/s.

Conforme:

DEXTER KILLY  
(Signature over Printed Name)

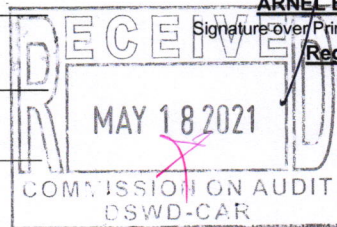
LAND BANK  
Bank Account Name

703-226-783-060  
TIN Number \*please tick tax type  
vat  
non-vat

17 May 2021  
Date

8551-0145-32  
Bank Account Number

6-14-2017  
Date of BIR Registration



ARNEL B. GARCIA, CESO II

Signature over Printed Name of Authorized Official

**Regional Director**

Designation

5/15/2021

|   |   |
|---|---|
| Fund Cluster: <u>CHF CURRENT</u>              | ORS/ BURS No. : <u>02-10101-2021-02-02455</u> |
| Funds Available: _____                        | Date of the ORS/ BURS: <u>5/14</u>            |
| <u>WILBOURN B. BACOLONG</u><br>ACCOUNTANT III | Amount: <u>76,300.00</u>                      |