

REQUEST FOR QUOTATION (RFQ)

PR/PP No.: 2021-06-330

End-user: UCT

Name of Project:

RFQ No.: 2021-06-599

Date: JUN 11 2021

ABC: ₱230,000.00

PRINTING OF FORMS FOR THE UCT LISTAHANAN AND SOCIAL PENSION CASH CARD
RELEASE

Mode of Procurement: SMALL VALUE PROCUREMENT

Sir/Madam: _____

Please quote your lowest price on the item/s described below inclusive of taxes duly signed by you or your authorized representative, subject to the Terms and Condition provided in this RFQ and submit personally to the Office of the Procurement Section, 40 North Drive, Baguio City or through email at bacsec.car@dswd.gov.ph on or before JUN 16 2021 12NN.

ENRIQUE H. GASCON JR.
OIC-ARDA/BAC Chairperson

TERMS AND CONDITIONS:

1. 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 ocular 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 Negotiated Procurement - Emergency Cases, Sec. 53.2, RA 9184 IRR)**
 - c. **Income/Business Tax Return (for Small Value Procurement, Direct Contracting above P500K, Emergency Cases above P500K, and Lease of Real Property/Venue).**
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 latter 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 following document prior to issuance of Award / Purchase Order with ABC amounting to P50,000.00 and above.
 - a. **Omnibus Sworn Statement (only for Negotiated Procurement - Emergency Cases, Sec. 53.2 and Small Value Procurement Sec. 53.9)**
13. 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**.
14. **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.
15. Further information may be obtained from the Procurement Section with telephone number **(074) 661-0430 local 25025** or email address bacsec.car@dswd.gov.ph.

Republic of the Philippines
DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT
 Cordillera Administrative Region
 40 North Drive, Baguio City

REQUEST FOR QUOTATION (RFQ)

| LOT NO. | DETAILED DESCRIPTION | QTY | UNIT | UNIT PRICE | TOTAL |
|---|---|---------|---|---------------|----------------|
| 1 | PRINTING OF FORMS FOR THE UCT LISTAHANAN AND SOCIAL PENSION CASH CARD RELEASE | | | | |
| | PRINTING OF CIS AND EMV FORMS OF UCT SOCIAL PENSION BENEFICIARIES -Plain Paper, A4, 70gsm, colored | 140,652 | pc | | |
| | PRINTING OF CIS AND EMV FORMS OF UCT LISTAHANAN BENEFICIARIES -Plain Paper, A4, 70gsm, colored | 89,348 | pc | | |
| SEE ATTACHED SAMPLE FOR REFERENCE. | | | | | |
| OTHER REQUIREMENTS | | | COMPLIANCE <small>Place a check (✓) mark whether can comply or not, no check mark will mean non-compliance.</small> | | REMARKS |
| | | | Can Comply | Cannot Comply | |
| | Delivery period is within 10 calendar days upon receipt of Purchase Order. When the last day of delivery falls on a weekend/holiday, the deadline shall be on the next working day. | | [] | [] | |
| | Amenable to signing a non-disclosure agreement attached to this Request for quotation | | [] | [] | |
| | Delivery place is at DSWD-CAR #40 Northdrive Baguio City | | [] | [] | |
| TOTAL PRICE | | | | | |

• Award shall be made per:

Lot basis

Total Quoted Price

Note: NO GIFT ALLOWED. Pursuant to RA 6713, otherwise known as the Code of Conduct and Ethical Standards for Public Officials and Employees. The DSWD reserves the right to reject any or all offers at no costs, waive any therein and accept the offer most advantageous to the government.

Sir:

After having carefully read and accepted your terms and conditions, I / We submit our bid on the item/s quoted above.

Signature of supplier/representative
 over printed name: _____

Name of Firm/Dealer/Contractor: _____

(This will be the name of the CHEQUE to be issued)

Address: _____

Email Address: _____

Contact Number/s: _____

PhilGEPS Registration Number: _____

 Name and Signature of Canvasser

VUB/644

NON-DISCLOSURE AND CONFIDENTIALITY AGREEMENT

This NON-DISCLOSURE AND CONFIDENTIALITY AGREEMENT is executed by _____ and _____ between _____, represented by _____, Filipino citizen, of legal age and with postal address at _____ and the Data Protection Officer (DPO), Marifil C. Jugal, Filipino citizen, of legal age and with office address at _____ of Field Office Cordillera, which governs the former's services, affecting or relating with the personal data of Unconditional Cash Transfer – Social Pension and Unconditional Cash Transfer - Listahanan beneficiaries. Specifically, the undersigned Service Provider undertakes to:

1. Strictly act in accordance with the provisions of Republic Act (RA) No. 10173 or the Data Privacy Act of 2012, RA 10173, its Implementing Rules and Regulations (IRR) and other related guidelines and issuances of the National Privacy Commission (NPC);
2. Observe in all activities the requirements imposed by the UCT – Regional Program Management Office (UCT – RPMO) and the policy and legal objectives of the program in relation to the collection and processing of data;
3. Consider all data to be given to me and/or that which comes to my possession, with or without knowledge of said DPO, relating to any UCT Social Pension and UCT Listahanan beneficiary as personal; treat any identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of the UCT Social Pension and UCT Listahanan beneficiary as “personal information”, and prevent its unauthorized disclosure through my direct or indication action, regardless of receipt of any advantage or benefit by me or any third person; and,
4. Safely dispose or destroy any personal data that may remain in my access or possession after my engagement as Service Provider; continue to maintain a high-level of confidentiality with any personal information which I may recall or reacquaint myself pertaining to any UCT Social Pension and UCT Listahanan beneficiary, lest I be subject of any criminal or infringement complaint for any unauthorized use of such personal information.

I HEREBY COMMIT TO INDEMNIFY AND HOLD MYSELF ACCOUNTABLE, as a Service Provider, unto the DSWD Cordillera represented by said DPO, for any damage or injury that may be suffered by said DSWD Cordillera as a result of my unauthorized access and use of any personal information.

IN WITNESS WHEREOF, the parties have hereunto signed this document on _____, 2020 at Baguio City.

FOR:
(SERVICE PROVIDER)

DSWD FIELD OFFICE – CAR

Proprietor

MARIFIL C. JUGAL
Data Protection Officer

Signed in the Presence of:

ACKNOWLEDGEMENT

REPUBLIC OF THE PHILIPPINES }
_____ } S.S.

BEFORE ME, a Notary Public for and in the above jurisdiction, this _____, 2021, personally appeared the following individuals:

| | Name | Competent Evidence of Identity | Date/Place Issued |
|----|-------|--------------------------------|-------------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |

Known to me to be the same persons who executed the foregoing instrument, consisting of two (2) pages, including this page and they acknowledged to me that the same are their free and voluntary act and deed.

WITNESS MY HAND SEAL on the date and place above written.

Doc. No. _____;
Page No. _____;
Book No. _____;
Series of 2021.

NOTARY PUBLIC