

Republic of the Philippines DEPARTMENT OF SOCIAL WELFARE AND DEVELOPMENT

Field Office 02

Regional Center, Carig, Tuguegarao City Tel Nos. (078)304-1004 Telefax (078)304-0586

REQUEST FOR PRICE QUOTATION

23-03-0212

Date:

Purpose:

March 13, 2023

for the Pest Control at DSWD FO2 Centers and Residential Care Facilities, located at Lingu, Solana &

Roma Norte, Enrile

The DSWI	Regional Office announces its intention to purchase goo	ods and service	es and invite	es into BID for th	e following:	
ITEM NO	ITEM	Quantity	Unit		Quotation Total Price	Remarks
	Pest & Termite Control at DSWD Compound (RSCC &	-		Unit Price	Total Price	
1	RHWG), 7,230 sq.m	1	lot			PR# 2023-03-
	Pest & Termite Control at DSWD Compound (CVRRCY),					0364
2	5,000 sq.m	1	lot			0304
	3,000 34.111	+				
					-	
	*suppliers are advise to conduct site ocular inspection					
	*inclusives of materials and labor, quarterly					
	maintenance check/inspection					
	Total Approved Budget = P 300,000.00					
	Total Approved Badget - 1 300,000.00					
Notes:				L-11 b	tually untarked	
	be sent through fax. Submission must be two (2) days up	oon receipt. La	te canvass s	nali be automat	ically rejectea.	
	uotations must be inclusive of tax.			AL DOMO De de	LOffina Basina	al Cantan Caria
All intere	sted suppliers are requested to SUBMIT THEIR BIDS on or	perore	10	the DSWD Regio	nai Office, Region	al Center, Carig,
	*DSWD E-Mail Address at bacsec.fo2@dswd.g	gov.ph				
	*DSWD Regional Bids and Awards Committee					
The follow	wing suppliers' business documents are required for subm	ission to DSWI	BAC Secre	tariat before bid		
	*DTI Business registration				Others Required	1:
	*Mayor's Permit *TAX Clearance					
Bids subn	nitted not in consonance with the above stated date, time	and place wou	ıld be reject	ed.		
					CEIDE	lander &
					BAC CI	ARAUDR.
					Dire	ector HU
Quoted by:					Canvassed By:	
	Registered Business Name	_			Car	nvasser
		_			(Signature ov	er printed name)
Printed N	lame and Signature of Owner/Authorized Representative					
Business	Address :	_				
Date of S	ubmission :	_				
Contact P	No :					
Terms of	Payment :					
TIN Numi						
		-				
Philgeps	Registration no.					
		VLEDGMENT R	ECEIPT			
Date:						
This is to	acknowledge receipt of Request for Price Quotation 23-	03-0212 from	he Departn	nent of Social W	elfare and Develo	pment (DSWD)
	ce 02, Regional Center, Carig, Tuguegarao City, Cagayan					,
	Company/Supplier/Bidder/Service Provider:					
Signature	over Printed Name of Representative/Owner	_			Date Received	