



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

Tulong!Sulong!

REQUEST FOR PRICE QUOTATION
21-10-0809

Date: October 20, 2021

Purpose: For the construction of Three(3) door Dormitory at 3rd floor of Operation Center, DSWD F02.

The DSWD Regional Office announces its intention to purchase goods and services and invites into BID for the following:

ITEM NO	ITEM	Quantity	Unit	Price Quotation		Remarks
				Unit Price	Total Price	
1	60cm x 60cm granite Tiles	450	pcs			PR# 2021-09-1620,1621 & 1622
2	30cm x 60cm wall Tiles	200	pcs			
3	60cm x 60cm non-skid floor tiles	40	pcs			
4	Tile adhesive	80	bags			
5	Tile grout	20	bags			
6	Tile diamond cutter, super thin	10	pcs			
Total Approved Budget=P 106,600.00						

Notes:
 *This can be sent through fax. Submission must be two (2) days upon receipt. Late canvass shall be automatically rejected.
 * Price quotations must be inclusive of tax.

All interested suppliers are requested to **SUBMIT THEIR BIDS** on or before _____ to the DSWD Regional Office, Regional Center, Carig, Tuguegarao City thru:

- *DSWD E-Mail Address at bacsec.fo2@dswd.gov.ph
- *DSWD Regional Bids and Awards Committee

The following suppliers' business documents are required for submission to DSWD BAC Secretariat before bid submission:

- *DTI Business registration
- *Mayor's Permit
- *TAX Clearance

Others Required: _____

Bids submitted not in consonance with the above stated date, time and place would be rejected.


CELSO L. ARMO JR.
 BAC Chairperson
 Chief Admin. Officer
 OIC, Asst. Reg'l Director for Admin
 Canvassed By: _____

Quoted by: _____

Registered Business Name _____

Canvasser
 (Signature over printed name) _____

Printed Name and Signature of Owner/Authorized Representative _____
 Business Address : _____
 Date of Submission : _____
 Contact No : _____
 Terms of Payment : _____
 TIN Number : _____
 Philgeps Registration no. _____

ACKNOWLEDGMENT RECEIPT

Date: _____

This is to acknowledge receipt of Request for Price Quotation 21-10-0809 from the Department of Social Welfare and Development (DSWD) Field Office 02, Regional Center, Carig, Tuguegarao City, Cagayan

Name of Company/Supplier/Bidder/Service Provider: _____

Signature over Printed Name of Representative/Owner _____

Date Received _____