Republic of the Philippines OVERSEAS WORKERS WELFARE ADMINISTRATION

Regional Welfare Office VI
3F, Robinsons Place Iloilo, Corner De Leon & Quezon Sts., Iloilo City
Telephone No. (033) 509-1075 TeleFax No. (033) 337-4484

P.R. No.: 2024-197 DATE: 8-Nov-24

REQUEST FOR QUOTATION / PROPOSAL

COMPANY NAME:

ADDRESS OF COMPANY:

To whom it may concern:

Please quote your lowest price/s (taxes included) on the lot or item/s below, subject to the General Conditions indicated herein, stating the shortest time of delivery and submit your quotation using your company letterhead or this form duly signed by your official representative to Overseas Workers Welfare Administration, Third Floor Robinsons Place Iloilo, Corner De Leon-Quezon Stretts, Iloilo City not later than November 18, 2024.

REMON A. ALBEZA
Supply Officer/BAC Secterariat

IZZA JG M. MOLDES Officer in-Charge

	<u> </u>						
PROJECT T	ITLE/NAME:	DEALER'S/SUPPLIER'S OFI					
ITEM NO.	SPECIFICATIONS	QTY	UNIT	APPROVED BUDGET FOR THE CONTRACT (ABC) OR BUDGET PER LINE ITEM	UNIT COST (Vat inclusive)	TOTAL COST (Vat inclusive)	
				₱165,000.00			
	November 23, 2024						
1	Plated Morning Snacks with drinks	50	pax				
2	Assisted Buffet Lunch (1 soup, steamed rice, 1 side dish, 2 main courses, 1 dessert, 1 rounds drinks)	50	pax				
3	Assisted Buffet Dinner (1 soup, steamed rice, 1 side dish, 2 main courses, 1 dessert, 1 rounds drinks)	50	pax				
	November 24, 2024						
1	Assisted Buffet Breakfast (1 soup, steamed rice, 1 side dish, 2 main courses, 1 dessert, 1 rounds drinks)	50	pax				
2	Assisted Buffet Lunch (1 soup, steamed rice, 1 side dish, 2 main courses, 1 dessert, 1 rounds drinks)	50	pax				
3	Plated Afternoon Snacks with drinks	50	pax				
	Room Accommodation						
	Check-in Date - November 23, 2024						
	Check-out Date - November 24, 2024						
1	Studio Type Room (2 pax per room)	25	room				
	-Wireless internet connection (WiFi)						
	-Use of recreational facilities (Gym. Launderette)						
	-With flat iron and ironing Board						
	-With sustainability on room amenities						
	-With safety deposit box						
	Package Inclusions:						
	-Free use of Function Hall with wide screen and podiumfor Two (2) days						
	-Free Flowing Cofee						
	-Free Wi-fi						
	l .						

-Tables and chairs for the participants			
-Basic lights, sounds and wireless microphone			
-4-TV monitors			
-Projector & Projector Screen			
-With pool for socials and Foyer			
Additional Documentary Requirements must be submitted upon submission of offer:			
1. PhilGEPS Certificate or PhilGEPS Registration Number			
2. Valid Mayor's / Business Permit			
3. Income/Business Tax Return (Latest)			
Please take note that the Omnibus Sworn Statements shall be submitted within 5 days upon acceptance of Notice of Award.			
SUNDITIONS		Total	

- 1. Entries must be typewritten / if handwritten, it must be clear and legible;
- 2. Bidders must submit certificate of PHILGEPS Registration;
 3. Bidders must submit necessary business permits (SEC, LGU, DTI, CDA, etc.);
- 4. All quotation can be submitted through the following means: a) in a SEALED ENVELOPE, or b) thru ELECTRONIC MAIL, or c) FACSIMILE. Label the envelope with the following:

Bidder's Company Name

PHILGEPS Reference No.

Project Title/Name

DELIVEDY.

PR No.

- 5. Item/s delivered must have warranties for unit replacements, parts, labor or other services;
- Quoted prices must be inclusive of taxes and shall not exceed the Approved Budget for the Contract (ABC);
 Proposal/Quotation submitted without signature of the authorized signatory shall not be accepted;
- 8. Proposal/Bid modifications submitted beyond the scheduled deadline shall not be considered;
- Price quoted/ submitted on the deadline shall be considered as final and unalterable;
- 10. Use of non-discretionary/non-discriminatory selection criteria as tie-breaking method in case of two or more bidders determined and declared as the Lowest Calculated and Responsive Bidder (LCRB) in accordance with GPPB Circular No. 06-2005;
- 11. The OWWA reserves the right to accept or reject any bid, to annul the bidding process, and to reject at any time prior to contract award, without thereby incurring any liability to

DELIVERI.	
TERMS OF PAYMENT:	-
PRICE VALIDITY:	_
	Company Name
	Print Name and Signature of Authorized Representative
	Designation
	Company Tel./Fax/Mobile No.