

NATIONAL AUTHORITY FOR CHILD CARE
#2 Chicago cor. Ermin Garcia Street, Barangay Pinagkaisahan, Cubao, Quezon City, 1111

REQUEST FOR QUOTATION

RFQ No. 2025-118 **NP-SVP**
Date: **February 27, 2025**

Company Name : _____
Company Address : _____
Contact Person : _____
Contact No. : _____
PhilGEPS Reg. No.: _____
Company TIN: _____

Sir/Madam:

Please quote your government price/s including delivery charges, VAT or other applicable taxes, and other incidental expenses for the goods listed in Annex A. Failure to indicate information could be basis for non-compliance. Also, furnish us with descriptive brochures, catalogues, literatures and/or samples, if applicable.

If you are the exclusive manufacturer, distributor or agent in the Philippines for the goods listed in Annex A please attach in your quotation a duly notarized certification to this effect.

Please submit together with your bid quotation, your valid 1. Mayor's/Business Permit (CTC), 2. PhilGEPS Registration Number (CTC). The Certificate of Platinum Membership may be submitted in lieu of the Mayor's/Business Permit and PhilGEPS Registration Number, 3. Certified True Copy of Income/Business Tax Return (For SVP & Emergency Cases with ABC above P500K, 4. Original and Notarized Omnibus Sworn Statement (For SVP with ABCs above P50K & For All Emergency Cases) 5. Certified True Copy of BIR Certificate of Registration 2303

Please accomplish and submit this form together with Annex A and all the required documents to NACC-BAC Secretariat at 5th Floor #2 Chicago cor. Ermin Garcia Street, Barangay Pinagkaisahan, Cubao, Quezon City, 1111 or email to procurement@nacc.gov.ph not later than **5th day of March 2025**. Quotations submitted to different email address(es) as stated above shall not be considered for evaluation.

Very truly yours,


FERDINAND MARCELO
Administrative Officer V

Terms and Conditions:

1. Award shall be made on per: Item Basis Total Quoted Price Lot Basis
2. Quotation validity shall be **Sixty (60) calendar days from the deadline of submission of quotations.**
3. Good/s shall be delivered within **15 to 30 calendar days upon receipt of Notice to Proceed**
4. Place of Delivery: **Regional Alternative Child Care Office 1**
5. Terms of Payment: **within 30-45 days upon completion of supporting documents.**
Payment through LDDAP-ADA (List of Due and Demandable Accounts Payable-Advise to Debit Account).
Account Name : _____ Account Number : _____
Bank Name : _____ Branch : _____
***Note: Non Land Bank of the Philippines accounts shall be charged a service fee.**
6. Liquidated Damages/Penalty: **In case of failure to make full delivery within the time specified above, the amount of the liquidated damages shall be at least equal to one-tenth of one percent (0.001) of the cost of the unperformed portion for every day of delay. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.**
7. For goods, please indicate brand, model and country of origin.
8. In case of discrepancy between unit cost and total cost, unit cost shall prevail.
9. Please indicate Warranty: _____
10. In case of a tie, the contract shall be awarded to the supplier or service provider who first submitted its quotation.
11. **NOTE: "Prospective supplier must be registered at the Philippine Government Electronic Procurement System (PhilGEPS). You may visit the PhilGEPS website at www.philgeps.gov.ph and register for free."**


EMIL A. BALACANAO

BAC Secretariat

Tet. Nos. Trunkline: (02) 8726-4551; 8721-9711; 8726-4588;
(02) 8721-9782

(Signature over Printed Name)
Supplier

