

Republic of the Philippines
Department of National Defense
OFFICE OF CIVIL DEFENSE
Camp General Emilio Aguinaldo, Quezon City

REQUEST FOR QUOTATION (RFQ) No. OCDRO NCR-0220-001

Company Name : _____
Address : _____
PhilGEPS Registration No. : _____

The Office of Civil Defense (OCD), through its Bids and Awards Committee (BAC), will undertake an **Alternative Method of Procurement through Negotiated Procurement** in accordance with **Section 53.10 Lease of Real Property and Venue** of the Revised Implementing Rules and Regulations of Republic Act. No. 9184.

The OCD hereinafter referred to as "the Purchaser", now requests submission of a price quotation for the subject below:

Name of Project	: Provision of hotel/venue/accommodation for the conduct of : A) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 1) B) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 2)
Location	: Within Quezon City
Date	: 30 March to 03 April 2020 (Batch 1); and 20-24 July 2020 (Batch 2)
Brief Description	: Hotel, Venue and Accommodation; Twin Sharing and Hotel must be at least 3-star
Terms of Payment	: Send Bill Policy
ABC (Approved Budget for the Contract)	: PHP 668,800.00
Fund Source	: OCDRO NCR Indicative APP for CY 2020 based on NEP

Award of contract shall be made to the bidder with the lowest quotation for the subject goods which comply with the minimum technical specifications and other terms and conditions stated herein. **All bids higher than ABC shall automatically be disqualified.**


Prospective bidders shall accomplish and submit the duly signed "**Annex A (Technical Specifications) & Annex "B" Price Quotation Form (PQF)**" (under prescribed form). **Non-submission shall automatically be disqualified.** Submission of SEALED QUOTATION is until **12:00 noon on 19 February 2020**, at the OCD BAC Secretariat Office, 2nd Floor, OCD Annex Building, Camp General Emilio Aguinaldo, Quezon City. Submit your **sealed quotation (indicate the project name)** duly signed by your authorized representative. For any clarifications, you may contact the **BAC Secretariat Office** at telephone no. **(02) 912-2964** or email address **atbacsec.o cd@gmail.com**. **Use of forms other than the attached OCD prescribed format is not acceptable.**

Interested supplier/service provider is required to submit the following documents:

1. Valid/Current Mayor's Permit/Business Permit (or Official Receipt of Renewal Application with the Expired Business Permit)
2. PhilGEPS Registration Number
3. Latest Income and Business Tax Return

Any alterations, erasures, or overwriting shall be valid only if they are signed or initialed by the bidder or his/her duly authorized representative. The penalty for late deliveries is one tenth (1/10) of one (1) percent of the cost of the unperformed portion for everyday of delay. The maximum deduction shall be ten percent (10%) of the contract price. Once the cumulative amount of liquidated damage reaches ten percent (10%) of the contract price, the procuring entity shall rescind the contract without prejudice to other courses of action and remedies open to it.

The OCD reserves the right to accept or reject any or all bids, waive any defect or informality therein, accept the bid and award the contract to the most advantageous offer, for and in behalf of the project.



ASEC KRISTOFFER JAMES E. PURISIMA
Chairperson
OCD Bids and Awards Committee

ANNEX "A"
Technical Specifications

Provision of hotel/venue/accommodation for the conduct of:

A) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 1)

B) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 2)

Bidders must state either **"Comply"** or **"Not Comply"** or any equivalent term in the column "Statement of Compliance" against each of the individual parameters of each "Specification."

Legend: *MANDATORY REQUIREMENTS. Failure to comply with any of the mandatory requirements will disqualify your quotation.

Item No.	Agency Specifications	Statement of Compliance																																				
I.	<p>Provision of hotel/ venue/ accommodation for the conduct of event: Name of Events: A) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 1) on 30 Mar to 03 Apr 2020; B) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 2) on 20 to 24 Jul 2020; Location: Within Quezon City</p> <p>A) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 1) on 30 Mar to 03 Apr 2020;</p> <table border="1" data-bbox="284 869 1193 1149"> <thead> <tr> <th>Room Requirement</th> <th>No. of Rooms</th> <th>Check-in date/time</th> <th>Check-out date/time</th> <th>No. of Nights</th> <th>Remarks</th> </tr> </thead> <tbody> <tr> <td>Twin Sharing (Separate Beds)</td> <td align="center">19</td> <td align="center">30 Mar 2020, 2PM</td> <td align="center">03 Apr 2020, 12 NN</td> <td align="center">4</td> <td>Participants and 4 instructors, 2 secretariat/ CM</td> </tr> <tr> <td>Total No. of Pax</td> <td align="center">38</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>B) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 2) on 20 to 24 Jul 2020;</p> <table border="1" data-bbox="284 1205 1193 1485"> <thead> <tr> <th>Room Requirement</th> <th>No. of Rooms</th> <th>Check-in date/time</th> <th>Check-out date/time</th> <th>No. of Nights</th> <th>Remarks</th> </tr> </thead> <tbody> <tr> <td>Twin Sharing (Separate Beds)</td> <td align="center">19</td> <td align="center">20 Jul 2020, 2PM</td> <td align="center">24 Jul 2020, 12 NN</td> <td align="center">4</td> <td>Participants and 4 instructors, 2 secretariat/ CM</td> </tr> <tr> <td>Total No. of Pax</td> <td align="center">38</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>Must have internet connection at least 10 mbps in the rooms and assigned function areas of the hotel Provide free bottled drinking water inside the room (to be replenished daily) or its equivalent Conference Room/Function Hall: - Function room to comfortably house 40 pax - Function Room set up a day before the event - Optional: Number of breakout rooms required: ___ with ___ capacity each - Optional: Room set-up 4 round tables with 8 chairs each - No posts/Columns that will obstruct the line of sight of participants - Must provide AV equipment such as three (3) LCD projector, three (3) flat screen/projector screen, with at least three sound system, with at least three (3) Microphones - Whiteboards with markers and erasers</p>	Room Requirement	No. of Rooms	Check-in date/time	Check-out date/time	No. of Nights	Remarks	Twin Sharing (Separate Beds)	19	30 Mar 2020, 2PM	03 Apr 2020, 12 NN	4	Participants and 4 instructors, 2 secretariat/ CM	Total No. of Pax	38					Room Requirement	No. of Rooms	Check-in date/time	Check-out date/time	No. of Nights	Remarks	Twin Sharing (Separate Beds)	19	20 Jul 2020, 2PM	24 Jul 2020, 12 NN	4	Participants and 4 instructors, 2 secretariat/ CM	Total No. of Pax	38					
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Meals/Restaurant Services:**A) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 1) on 30 Mar to 03 Apr 2020;**

Meal / Snack	No. of Pax	Serving Arrangement	Inclusive Date	Menu	Other requirements
Breakfast	38	Buffet	31 Mar to 03 Apr 2020	Accdg to hotel	
AM Snack	38	Plated	31 Mar to 03 Apr 2020	TBD accdg to menu	Including beverages of juice and coffee
Lunch	38	Managed Buffet	31 Mar to 03 Apr 2020	2 Viands, 1 Vegetable, Soup, Rice, Dessert	Including beverages of soda or juice and coffee
PM Snack	38	Plated	31 Mar to 03 Apr 2020	TBD accdg to menu	Including beverages of juice and coffee
Dinner	38	Managed Buffet	30 Mar to 02 Apr 2020	2 Viands, 1 Vegetable, Soup, Rice, Dessert	Including beverages of soda or juice and coffee

B) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 2) on 20 to 24 Jul 2020;

Meal / Snack	No. of Pax	Serving Arrangement	Inclusive Date	Menu	Other requirements
Breakfast	38	Buffet	21-24 Jul 2020	Accdg to hotel	
AM Snack	38	Plated	21-24 Jul 2020	TBD accdg to menu	Including beverages of juice and coffee
Lunch	38	Managed Buffet	21-24 Jul 2020	2 Viands, 1 Vegetable, Soup, Rice, Dessert	Including beverages of soda or juice and coffee
PM Snack	38	Plated	21-24 Jul 2020	TBD accdg to menu	Including beverages of juice and coffee
Dinner	38	Managed Buffet	20-23 Jul 2020	2 Viands, 1 Vegetable, Soup, Rice, Dessert	Including beverages of soda or juice and coffee

Must have pork-free alternative meals to cater the Muslim guests
Free flowing coffee/tea during the duration of the activity at the function room

Other Requirements:

- Hotel must be located in/ within **Quezon City**
- Must be at least 3 star hotel with (amenities required)
- Must be in business for at least two (2) years

	<ul style="list-style-type: none"> • Hotel must be able to adjust to the abrupt change in the number of hotel rooms needed for the event • Must have provision for the elderly, PWDs, pregnant women and children • Must provide free at least 10 parking space for participants/facilitators • Must have hot and cold water line/water heater • Must replenish toiletries and towels everyday • Preferably has TV set, refrigerator and coffee percolator in the room • Preferably has bidet and hair blower <p>Payment: Must accept SEND BILL policy as payment arrangement</p>	
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I hereby certify to comply and deliver all the above requirements.

Company Name : _____
 Address : _____

AUTHORIZED REPRESENTATIVE

Signature : _____
 Complete Name : _____
 Date : _____



ANNEX "B"
Price Quotation Form

The Bids and Awards Committee
OFFICE OF CIVIL DEFENSE
Camp Gen. Emilio Aguinaldo, Quezon City

Sir/Madam:

1. After having carefully read and accepted the terms and conditions in the Request for Quotation, hereunder are our financial proposal for the items identified below:

ARTICLE AND DESCRIPTIONS	Total Price
A) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 1)	PHP
B) 4-DAY Public Service Continuity Plan for LDRRMOs (Batch 2)	PHP
TOTAL PRICE	PHP

AMOUNT IN WORDS: _____

Note: The above quoted prices are VAT Inclusive.

2. We agree to abide by the Quotation/bid for a period of sixty (60) days after the dated deadline of submission specified in your RFQ.
3. We understand that payment for items will be made to the winning supplier after the inspection and acceptance of good(s) delivered.
4. The above-quoted price is inclusive of all costs and applicable taxes.

Company Name : _____

Address : _____

Office Tel. No. & Mobile No. : _____

Email Address : _____

AUTHORIZED REPRESENTATIVE

Signature : _____

Date : _____

