

**DEPARTMENT OF TOURISM**  
National Capital Region  
Telefax: 8553-3530  
Direct Line: 8553-3531/09202909993  
Email: dotncr.bac@tourism.gov.ph

Date: October 31, 2024

GENTLEMEN:

**REQUEST FOR QUOTATION**

Kindly quote to us your latest price(s) on the following item(s):

QTY	UNIT	ITEM/DESCRIPTION/SPECIFICATION	UNIT PRICE
		<b>SERVICE OF A GROUND/TOUR HANDLER /OPERATOR</b>	
<b>1 (ONE)</b>	<b>LOT</b>	<b>PROJECT NAME : THE GLOBAL IT CHALLENGE FOR YOUTH WITH DISABILITIES CULTURAL HOSTING OF MANILA TOUR</b>	
		<p><b>I. BRIEF BACKGROUND :</b></p> <p>The Global IT Challenge for Youth with Disabilities is an annual event that started in 2011, touring different Asia-Pacific countries to strengthen ICT capabilities of youth with disabilities around the world, lay the foundation for social advancement, and further improve digital awareness. Over the past decade, about 4500 youth with disabilities from 28 countries have participated in the Challenge. Through continuous cooperation with governments, international organizations and corporations, it has developed into the most established IT competition for youth with disabilities in the world. The Global It Challenge seeks to strengthen the IT capabilities of youth with disabilities and bridge the digital divide, and for this year 2024, it will be developed into a more sustainable competition for participants ages 14 years old – 27 years old representing 17 countries.</p>	
		<p><b>II. OBJECTIVES:</b></p> <p>a. To strengthen ICT capabilities of youth with disabilities and establish the foundation for social advancement; and</p> <p>b. To render support and assistance to participating countries and GITC organizing Committee in the realization of the 2024 GITC for Youth with Disabilities programs in the Philippines.</p>	
		<b>III. TECHNICAL SPECIFICATIONS :</b>	
		<p><b>Implementation Date : November 7, 2024.</b></p> <p><b>Area : Metro Manila</b></p>	
		<ul style="list-style-type: none"> <li>• HOHO Buses for the Curated Manila City Tour Package for 160 pax</li> <li>• HOHO Day Pass</li> <li>• Provision of 4 DOT- Accredited English Speaking Tour Guides</li> <li>• Tax Inclusive</li> <li>• Travel Insurance</li> <li>• Tour of National Museum of Natural History</li> <li>• Pick up and Drop Off Points from Manila Hotel to National Museum / from National Museum to Manila Hotel/ from Manila Hotel to Manila Ocean Park / from Manila Ocean Park to Manila Hotel (Whole Day Tour from 8:30 am – 5:00 pm)</li> </ul> <p><b>Note : Tour itinerary is attached</b></p>	
		<p><b>Terms of Payment :</b></p> <p>➤ willing to engage in send bill arrangement.</p>	

		<b>Documentary Requirements to be Submitted:</b>	
		<ul style="list-style-type: none"> <li>• Mayor's Business Permit</li> <li>• PHILGEPS Membership</li> <li>• DOT Accreditation Certificate</li> </ul>	
		<p align="center"><b>Approved Budget for the Contract (ABC):</b>  <b>Php 333,332.80</b>  <b>Pesos : Three Hundred Thirty-Three Thousand Three Hundred</b>  <b>Thirty-Two and 80/100 Only</b></p> <p align="center"><i>* inclusive of all applicable taxes, EVAT/VAT/government taxes/service charge/and other applicable taxes and charges net upon completion of the project and delivery of all requirements as agreed upon.</i>  <i>Government procedure and subject to appropriate government taxes</i></p>	
		<p><b>Contact Persons:</b>  <b>MS. MARIVILLE P. RAMOS - <a href="mailto:mpramos@tourism.gov.ph">mpramos@tourism.gov.ph</a></b>  <b>ADRIAN D. MORENO - 0956-966-6649</b></p>	
		<p>Please quote your lowest price for the above requirements and submit your quotation along with documentary requirements VIA PERSONAL SERVICE AND/ OR COURIER in three (3) original sets IN A SEALED ENVELOPE to this office address:  <b>DOT NCR BAC SECRETARIAT</b>  <b>Mr. Lawrence J. Alcantara – Head, NCR BAC Secretariat</b>  <b>7840 Makati Avenue, Poblacion, Makati City</b></p>	
		Note: Deadline of submission is on <b>November 06, 2024 at 8:00am</b>	

This office desires to place an order for the above item(s) with the minimum delay. Your firm quotation will help us very much in placing the order.

Thank you

\_\_\_\_\_  
**PRINT NAME OF DEALER/SUPPLIER**

\_\_\_\_\_  
**ADDRESS OF DEALER/SUPPLIER**

\_\_\_\_\_  
**CONTACT NUMBER(s)**

\_\_\_\_\_  
**Email Address**

**TIN:** \_\_\_\_\_

\_\_\_\_\_  
**LANDBANK ACCOUNT NUMBER**

\_\_\_\_\_  
**AUTHORIZED SIGNATURE OVER PRINT NAME**