



Republic of the Philippines
SOCIAL SECURITY SYSTEM

East Ave., Diliman, Quezon City
Tel. Nos. (632) 920-6401 • (632) 920-6446
E-mail: member_relations@sss.gov.ph • Web site: <http://www.sss.gov.ph>

NOTICE TO PROCEED

26 August 2021

RADYO NATIN LAGUNA
(DZVA 106.3 FM)
3/F SQA Corporate Center
National Highway, Brgy. I
Calamba City, Laguna

Attention: **RICHARD N. ORLAIN**
Operations Manager

Dear Mr. Orlain:

Notice is hereby given to your company that the award of the project: **Procurement of One-Hour Airtime for the SSS Public Service Regional Radio Programs as part of the Promotional Activities of Various SSS Campaigns (Luzon South 1)**, having been approved, your company may now commence performing its obligation effective upon receipt of this notice. You are responsible for the compliance of the terms and conditions under the Contract and its attached documents.

Accordingly, kindly coordinate with the CEO III Jay L. Labadia of Media Affairs Department, SSS Main Office, East Avenue, Diliman, Quezon City with telephone no. 8924-7295 and email address labadiajl@sss.gov.ph, for the implementation of the project.

Further, be reminded of the following:

1. Delay in the performance of obligation – Liquidated damages equivalent to 1/10 (0.001) of 1% of the unperformed portion of the contract or up to a maximum of 10% of the contract price shall be charged for every day of delay.
2. Variation, amendment and suspension of contract (see Annexes “D” and “E” of the Implementing Rules and Regulations of RA 9184, for reference) – Do not start variation, amendment or suspend implementation of the contract without prior approval from the SSS. Send a letter request to SSS through Mr.Labadia for variation,

amendment or suspension of contract, whichever is applicable.

Please acknowledge receipt and acceptance of this notice by signing both copies of this notice.

Thank you.

Very truly yours,



DORENDA M. DASMARIÑAS
Vice President
Procurement Management Division

I acknowledge receipt of this Notice on _____
Printed Name of the Representative _____
Designation of the Representative _____
Signature of Authorized Representative _____