

# LIVE-OUT CONTRACT

Date of Issuance

November 20, 2019

:

Company / Engager

PHILHEALTH PRO NCR

**Duly Represented by** 

MS. GILDA SALVACION A. DIAZ

Designation

Vice President, PRO NCR

Office Address

9<sup>th</sup> Floor Corporate 145 Building Mother Ignacia

South Triangle, Quezon City

Thru

Ms. Yvonne Fernandez

Telephone No. (02) 4417442

Emails: gansit@philhealth

**Event Title** 

"Seminar/ Workshop

## 5HQC-432-2019

# I. LIVE-OUT ARRANGEMENT

**Event Date** 

**DECEMBER 3-4 & 11, 2019** 

Time

8:00AM-5:00PM

Venue

Day 1- Maple & Cedar (Ground Floor)

Day 2- Pine (Mezzanine)

Day 3- Cypress (Mezzanine)

Date of Event	Meals	No. of Participants	Rate
December 3, 2019	Plated AM Snack.	47	Php 1 400 00
December 4, 2019	Managed Buffet Lunch (3	47	Php 1,400.00
December 11, 2019	Viands) & Plated PM Snack		Php 1,400.00
		46	Php 1,400.00

Inclusions

Plated AM Snack, Managed Buffet Lunch & Plated PM Snack

1 round of drink

Free flow of coffee & tea

# Note:

- Venue may change without prior notice. The hotel reserves the right to change the venue at any given time depending on the availability and capacity of the function rooms.
- Function rooms are held only between the hours indicated on the contract. Thus, beyond the complimentary extension, guests are expected to vacate the area unless the hotel is notified of an extension with additional charge.
- Number of attendees stated in the contract will be considered your guarantee, thus, no decrease will be entertained. In the event the actual attendance exceeds the guarantee, the hotel will charge the additional persons based on the actual attendance.

# **II. BANQUET AMENITIES**

The Hotel shall provide the following on complimentary basis:

- Set-up for guaranteed number of persons
- Use of one (1) rostrum
- Complimentary us of 1 Widescreen & 1 LCD Projector
- Minimal sound system with 2 extra microphones



- Use of extension cords
- Complimentary Hotel Wi-Fi

All drinks during organized meals will be on personal account, to be settled individually upon rendition of service. As general rule, all food and beverage shall be purchased exclusively from the HOTEL. Otherwise the ongoing rate for corkage fee shall be implemented.

The hotel will only allocate 10% allowance in excess of the minimum guaranteed number of person. Should there be any last minute change in the HOTEL or if actual attendance exceeds the 10% spill-over allowance, the menu to be served shall be subject to Chef's Discretion and 10% surcharge will be added. The hotel will not be responsible for any delay in food replenishment, should the actual number of guests exceed more than 10% spill-over allowance. Brown-bagging, take-out/home for buffet left-over is STRICTLY PROHIBITED.

Any loss and/or damage to the Hotel's property during use of our rooms and facilities will be charged correspondingly.

#### **III. BILLING ARRANGEMENT**

## **ESTIMATED TOTAL CONTRACT PRICE**

Live-Out Arrangement					
Event Date	No. of Days	No. of Persons	Rate per Pax	Total	
December 3	1	47	1,400.00	Php 65,800.00	
December 4	1	47	1,400.00	Php 65,800.00	
December 11	1	. 46	1,400.00	Php 64,400.00	

**GRAND TOTAL** 

PHP 196,000.00

SEND BILL:

- ✓ Certificate of Availability of Funds (CAF) or Purchased Order
  (PO) must be provided upon signing of the contract.
- ✓ To be settled within Ninety (90) days upon receipt of the Statement of Account.

For check payment, bank account details are as follows:

# LAND BANK OF THE PHILIPPINES

KIM BREZ CORPORATION DBA SEQUOIA HOTEL East Avenue, Quezon City Branch Account No. 0571-1195-87

#### **METROBANK**

KIM BREZ CORP DBA SEQUOIA INN AND HOTEL Mother Ignacia, Quezon City Branch Account No. 225-7-225-51334-8

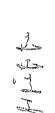
## **STERLING BANK OF ASIA**

KIM BREZ CORPORATION DBA SEQUOIA HOTEL South Triangle, Quezon City Branch Account No. 248-2-000033-21

#### **III. CANCELLATION POLICY**

Should the CLIENT wish to cancel this agreement, a written notice shall be served to the hotel before the scheduled event. Cancellations will be accepted only if advised at least Fifteen (15) days prior to the supposed date of function.

Should the CLIENT fail to give the required notice, 50% of the total contract price will be billed to the ENGAGER.





#### **IV. FORCE MAJEURE**

In the event of non-performance due to the following reasons: consequence of war, change statutes of the Philippine Government, strike, riots, and other civil disturbances, typhoons, floods, natural calamities and other Acts of Nature, fire or such other conditions and events beyond our control, the HOTEL shall not be responsible for failure to execute obligations specified herein directly and indirectly occasioned by or through as mentioned above. Thus, the Hotel will extend at least 6 months to consume your deposit.

The ENGAGER herein understands and agrees that the HOTEL shall not in any way whatsoever be responsible or liable to the ENGAGER for any loss, damages or injuries caused to or sustained by the ENGAGER or his/her guests by reason of causes beyond the HOTEL's control, including but not limited to robbery, theft, pilferage, fire, flood or any contingency of whatsoever kind of nature.

#### VI. ACCEPTANCE

If the ENGAGER is a corporation, partnership or organization, the person or persons signing for and in behalf of the corporation, partnership or organization shall be personally, jointly and severally liable to the HOTEL for the payment of the obligation herein incurred for the FUNCTION and/or any damages and/or losses incurred by the HOTEL during or by reason of such FUNCTION caused by willful acts, omission or negligence of the client or its guest. The signing and execution of this agreement and conformity on his/her part to be jointly and severally liable personally together with the ENGAGER whom he/she represents.

SEQUOIA HOTEL and PHILHEALTH have agreed to and have executed this AGREEMENT by their authorized representatives as of the dates indicated below:

FOR AND ON BEHALF OF SEQUOIA HOTEL:

Noted by:

Sales Manager

Approved by:

Director of Sales & Marketing

**ENGAGER:** 

Accepted by:

Vice President, PRO NCR

Date: \_