



Republic of the Philippines
QUEZON CITY GOVERNMENT
BAC- Goods and Services
2nd Floor, Procurement Department,
Finance Building, Quezon City Hall Compound



REQUEST FOR QUOTATION
SMALL VALUE PROCUREMENT
(SECTION 53.9)

Date : December 9, 2020
PR No. : GF-20-09-01427

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : **PROCUREMENT OF VARIOUS MEDICAL SUPPLIES**
Approved budget of
the Contract : **Php 131,035.65**
End-User /
Implementing Office : **SOCIAL SERVICES DEVELOPMENT DEPARTMENT**

Please quote your best offer for the item/s described below, subject to the Terms and Conditions provided. Submit your quotation duly signed by you or your duly authorized representative not later than December 14, 2020, 10:00 a.m. Philippine Standard Time, together with the following documents of your company:

- 1 PhilGEPS certificate (not expired on the time of opening of quotations);
- 2 Business Registration (DTI / SEC);
- 3 Mayor's/Business Permit (2020);
- 4 Tax Clearance;
- 5 Income/Business Tax Return (for FY 2019) (For ABC P500,000.00 above);
- 6 Omnibus Sworn Statement prescribed by the Government Procurement Policy Board (GPPB).
- 7 If applicable, the JVA in case the joint venture is already in existence, or duly notarized statements from all the potential joint venture partners stating that they will enter into and abide by the provisions of the JVA in the instance that the bid is successful.

in a **SEALED LONG BROWN ENVELOPE** shall:

- 1 Contain the Project Name and PR Number of the contract to be bid in capital letters;
- 2 Bear the name and address of the Bidder in capital letters;
- 3 Be addressed to the Procuring Entity's BAC.

Project Title : PROCUREMENT OF VARIOUS MEDICAL SUPPLIES
Quezon City Local Government
BIDS AND AWARDS COMMITTEE
2/F Procurement Department, Finance Building
Quezon City Hall Compound

For any clarification you may contact us at 89884242 loc. 8506/8709.


ATTY. DOMINIC B. GARCIA
Officer-In-Charge/Head, BAC Secretariat

TERMS AND CONDITIONS

- 1. Bidders shall **provide correct and accurate** information required in this form in black ink only.
- 2. Price quotation/s must be valid for a period of thirty (30) calendar days from the date of submission.
- 3. Price quotation/s, to be denominated in Philippine Peso shall include all taxes, duties and/or levies payable.
- 4. Quotation **exceeding** the Approved Budget for the Contract (ABC) shall be **rejected**.
- 5. Award of contract shall be made to the lowest quotation (for goods) or the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
- 6. Any interlineations, erasures or overwriting shall be valid only if they are signed or initiated by you or any of your duly authorized representative/s.
- 7. The City General Services Department (CGSD) shall have the right to inspect the goods.
- 8. Non-submission of eligibility documents shall mean disqualification of Quotation.
- 9. Liquidated damages equivalent to one tenth (1/10) of one percent (1%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. CGSD shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.
- 10. Failure to follow these instructions will disqualify your entire quotation.

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s as follows:

ITEM NO.	ITEM & DESCRIPTION	UNIT OF ISSUE	QTY.	UNIT PRICE	ITEM TOTAL
	MEDICAL, DENTAL &. LABORATORY SUPPLIES				
1	Alcohol, isopropyl 70%, rubbing, 500ml, in plastic bottle	Bottle	110		
2	Clinical Thermometer, No water proof, no glass or mercury can be disinfected, signal tone at the end of measurement automatic switch off, protective case/axillary	Pc	20		
3	Cotton Ball-absorbent, 300 balls/pack, good quality	Pack	57		
4	Disposable Syringes, 3cc, sterile, non-toxic, non-pyrogenic	Pc	30		
5	Disposable Syringes, 5cc, sterile, non-toxic, non-pyrogenic	Pc	30		
6	Elastic bandage, 4 inches x 5 yards, stretchable with clip, good quality	Pc	50		
7	Face mask, surgical, sterile, disposable, 3 ply ear loop, 50's/box, good quality	Box	17		
8	Gauze pads, 4x4x8 sterile, 100% cotton, mesh 28 x 24, 100's/box	Box	21		
9	Gloves, non-sterile, rubber care, hypoallergenic, size 7, 100s/box	Box	66		
10	Glucometer strip, One Touch Ultra, blood glucose monitoring strip	Tube	4		
11	Hot and Cold Pack, heavy duty, plastic made refillable, good quality	Pc	14		
12	Hydrogen Peroxide, 500ml, 30% solution, anti-septic, red	Bottle	14		
13	Ice cap, reinforced icebag, leak proof with rubber interior, good quality, fabric with attractive design screw type, plastic tension cap, easy opening/closing, size 8	Pc	10		
14	Infrared Thermometer, 1L, good quality, heavy duty	Pc	12		
15	Lancet, One Touch Ultra soft for capillary blood sampling, sterile	Pc	50		
16	Medical Plaster, Plastic, brown, 1 inch, good quality	Pc	29		
17	Nebulizer kit, tubing with tee mouth piece, sterile, individually wrapped	Kit	27		
18	Povidone Iodine Solution, 500ml, 10% solution, good quality	Bottle	5		
19	Povidone Iodine, 120ml, 10% solution, antiseptic/ disinfectant	Bottle	4		

20	Pregnancy Test Kit, good quality, HCG test cassette	Unit	60		
21	Sterile Specimen Container, with attached name of patient, plastic, 30ml, sealed	Pc	200		
22	Surgical Suture, black, braided, non-absorbable 4/0, 3/0	Pc	20		
23	Tape Micropore, hypoallergenic, size: 1 inch x 5 meter, 12s/box, good quality, branded	Box	7		
24	100ml. Anti-Flatuleut, chamomile oil flavor	Bottle	5		
25	BL Cream, 10 ml. Antifungal cream	Pc	20		
26	Supreme Ear Thermometer, Infra RED, easy clean, cover ree design, accurate result in or	Unit	2		
27	Thermometer-Digital, non-mercury, digital, with beeper mode, safe, accurate and fast temperature measurement, good quality,	Unit	2		
28	Utility Box, heavy duty, 12 liters, w 2-3 piece, box dividers, transparent	Pc	2		
Total Quoted Amount					

Amount in Words: _____

OTHER INSTRUCTIONS/SPECIFICATIONS:	
1. Copy of valid, current License to Operate for Medical Supplies/Devices from DOH Accreditation as Supplier, Distributor or Manufacturer	
2. Copy of current and valid Certificate of Product Registration (CPR) For Item Nos. 4, 5, 15 and 22	

Delivery Period : Fifteen (15) calendar days

Warranty : _____

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address