



REQUEST FOR QUOTATION
NEGOTIATED PROCUREMENT
(SECTION 53.1)

Date : December 15, 2020
PR No. : GF-20-2C-QCGH

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : **PROCUREMENT OF REAGENTS AND CONSUMABLES FOR FULLY AUTOMATED HEMATOLOGY ANALYZER**
Approved budget of the Contract : **Php 2,708,000.00**
End-User /
Implementing Office : **QUEZON CITY GENERAL HOSPITAL**

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 18, 2020, 10:00 AM 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; and
- 5 Omnibus Sworn Statement prescribed by **QC BAC – Goods and Services**
- 6 Income/Business Tax Return (for FY 2019) (For ABC P500,000.00 above)
- 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 :	<u>PROCUREMENT OF REAGENTS AND CONSUMABLES FOR FULLY AUTOMATED HEMATOLOGY ANALYZER</u>
	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
	<u>PR NO. GF-20-05-00762</u>				
	Reagents and Consumables for Fully Automated ≥5 Part Hematology Analyzer				
1	Fluorescent dye (Stain for wbc nucleic acid) ≥42ml, 1,400 tests/box	box	24		
2	Differential Hemolysin 1 Liter, 900 tests	bottle	25		
3	Hemoglobin Hemolysin 500ml, 1,250 tests	bottle	25		
4	Diluent 20Liter, 700 tests	tank	36		
5	Control (low, normal, high) set 3 tubes of 4.5ml	kit	3		
6	System cleaner, 1 liter	bottle	12		
	Terms of reference 1. Must provide machine with measurement principle of Fluorescence and Flow Cytometry or higher principle and backup machine using the same reagents. 2. EQAS performance grade must not be lower than Very Satisfactory for all test parameters per cycle. 3. Preferably capable of counting cells in other human body fluids (CSF, peritoneal fluid, ascitic fluid & others). 4. Item #1 Fluorescent Dye: In lieu of this item, a machine of higher technology capable of performing the desired function of this item may be accepted. 5. Must have installation in other tertiary hospital/s within Metro Manila. Provision of the following: a. Preventive Maintenance and calibration as needed by the machine, with certificate and sticker. b. Printer with provision of ink to produce test printouts. c. 24/7 technical support system in case of machine breakdown. d. Certificate of availability of stocks and ability to deliver. e. LIS connectivity license that is compatible with the existing HIS and functional for at least 1 year. f. Must provide training/actual demo for at least 1 week for not less than 3 Medical Technologists.				

2

	PR NO. GF-20-10-01747				
	Reagents and Consumables for Fully Automated ≥5 Part Hematology Analyzer				
1	Fluorescent dye (Stain for wbc nucleic acid) ≥42ml, 1,400 tests/box	box	10		
2	Differential Hemolysin 1 Liter, 900 tests	bottle	18		
3	Hemoglobin Hemolysin 500ml, 1,250 tests	bottle	18		
4	Diluent 20Liter, 700 tests	tank	20		
5	Control (low, normal, high) set 3 tubes of 4.5ml	kit	2		
6	System cleaner, 1 liter	bottle	12		
	Terms of reference 1. Must provide machine with measurement principle of Fluorescence and Flow Cytometry or higher principle and backup machine using the same reagents. 2. EQAS performance grade must not be lower than Very Satisfactory for all test parameters per cycle. 3. Preferably capable of counting cells in other human body fluids (CSF, peritoneal fluid, ascitic fluid & others). 4. Item #1 Fluorescent Dye: In lieu of this item, a machine of higher technology capable of performing the desired function of this item may be accepted. 5. Must have installation in other tertiary hospital/s within Metro Manila. Provision of the following: a. Preventive Maintenance and calibration as needed by the machine, with certificate and sticker. b. Printer with provision of ink to produce test printouts. c. 24/7 technical support system in case of machine breakdown. d. Certificate of availability of stocks and ability to deliver. e. LIS connectivity license that is compatible with the existing HIS and functional for at least 1 year. f. Must provide training/actual demo for at least 1 week for not less than 3 Medical Technologists.				
	Total Quoted Amount				

Amount in Words: _____

Other Requirement/s: Affidavit of Undertaking stating the following: <ul style="list-style-type: none"> Must provide machine with measurement principle of Fluorescence and Flow Cytometry or higher principle and backup machine using the same reagents. External Quality Assurance Services (EQAS) performance grade must not be lower than Very Satisfactory for all test parameters per cycle. Preferably capable of counting cells in other human body fluids (CSF, peritoneal fluid, ascitic fluid & others). Item #1 Fluorescent Dye: In lieu of this item, a machine of higher technology capable of performing the desired function of this item may be accepted. Must have installation in other tertiary hospital/s within Metro Manila. Must provide needed preventive maintenance and calibration as needed by the machine, with certificate and sticker. 24/7 technical support system in case of machine breakdown. Must have a printer with provision of ink to produce test printouts. Must have Certificate of availability of stocks and ability to deliver. Must provide Laboratory Information System (LIS) connectivity license that is compatible with the existing Hospital Information System (HIS) and functional for at least 1 year. Must provide training/actual demo for at least 1 week for not less than 3 Medical Technologists.
Copy of valid, current License to Operate for Medical Supplies/Devices from DOH Accreditation as Supplier, Distributor or Manufacturer

2

Delivery Period

:

Fifteen (15) Calendar Days

Warranty

:

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

E-mail Address