



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 : March 16, 2021
PR No. : GF-21-01-00041

Name of Company : _____

Address : _____

Contact No. : _____

Project Title : **PROCUREMENT OF VARIOUS SUPPLIES (PREGNANCY TEST KIT AND OTHERS)**

Approved budget of the Contract : **Php 367,778.26**

End-User /
Implementing Office : **QUEZON CITY PROTECTION CENTER**

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 March 22, 2021, 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 (2021);
- 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 : **PROCUREMENT OF VARIOUS SUPPLIES**
(PREGNANCY TEST KIT AND OTHERS)
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
1	Non-Woven Face Mask (Disposable) 50 pcs/box	box	180		
2	Clean Gloves Non-Sterile 100 pcs/box	box	50		
3	Sterile Gloves size 6 1/2" 100pcs/box	box	50		
4	Cotton Pledgets 6" Sterile 100 packs/box	box	50		
5	Sterile Gauze size 10cm x 10 cm 8 ply 100 pcs/box	box	50		
6	Aneroid Sphygmomanometer	piece	20		
7	Micropore Tape 1 inch	piece	200		
8	Glass Slide 72 pcs/box	box	19		
9	Betadine 100 ml	bottle	60		
10	Alcohol 70% 500ml	bottle	998		
11	Hydrogen Peroxide 1000 ml	bottle	30		
12	Linen White Flat Sheets for Examination Bed	piece	20		
13	Patient's Gown Round Neck, Large	piece	20		
14	Hot and Cold Pack	piece	30		
15	Pregnancy Test Kit 50 pcs/box	box	50		
16	Syringe 3cc 100 pcs/box	box	33		
17	Thermal Scanner	piece	20		
18	Medicine Box Medical Kit/First Aid Kit	set	5		
Total Quoted Amount					

Amount in Words: _____

Other Requirements:
<ul style="list-style-type: none"> • Copy of valid, current License to Operate for Medical Supplies/Devices from DOH Accreditation as Supplier, Distributor or Manufacturer

Delivery Period : Thirty (30) Calendar Days
 Warranty : _____

 Signature over printed name

 Office Telephone No./Fax/Mobile No.

 Date

 E-mail Address