



Republic of the Philippines
QUEZON CITY GOVERNMENT
BIDS AND AWARDS COMMITTEE
2nd Floor, Procurement Department,
Finance Building, Quezon City Hall Compound



REQUEST FOR QUOTATION
NEGOTIATED PROCUREMENT
SECTION 53.1

Date: May 11, 2021
PR No: GF-21-01-00061

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : **PROCUREMENT OF MEDICAL OXYGEN (REFILL) AND OTHERS**
Approved Budget for the Contract : **Php 6,996,912.00**
End-User / Implementing Office : **NOVALICHES DISTRICT 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 **MAY 14, 2021, 11:00 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 (2021);
- 4 Tax Clearance;
- 5 Income/Business Tax Return (for FY 2020) (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 MEDICAL OXYGEN (REFILL) 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. 8505/8709.


ROWENA T. MACATAO
Chairperson, BAC- Goods and Services

TERMS AND CONDITIONS

- 1. Bidders shall **provide correct and accurate** information required in this form.
- 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 initialed 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	Medical Oxygen (refill), standard cylinder, 1800lbs PSI	Cyl	1,740		
2	Compressed Air (refill), standard cylinder, 1800lbs PSI	Cyl	3,000		
3	Liquid Oxygen (Medical Oxygen) 1 lot/centralized oxygenation Purity: 99.6% to 99.7% Cryogenics storage already existing.	Cu.m	79,992		
	***with ISO Certificate for the scope of Activities manufacture of Medical grade Oxygen TERMS AND CONDITIONS: a) CONTRACT PERIOD: up to December 31, 2021 b) PLACE OF DELIVERY: The Supplier will supply Medical Oxygen, Compressed Air & Liquid Oxygen at the Novaliches District Hospital, San Bartolome, Novaliches, Quezon City c) SCHEDULE OF DELIVERY: Monday, Wednesday, Friday & On Call for Medical Oxygen, Compressed Air and Liquid Oxygen d) CONSIDERATION : The total consideration, as allocated by the City shall be Php6,996,912.00 up to December 31,2021 computed on a monthly allocation. e) TERMS OF PAYMENT : The City shall pay the supplier on a monthly basis depending on the actual number of wards served and upon complete delivery and acceptance of the goods delivered herein and upon presentation of the billing statement f) ASSIGNMENT : Unless otherwise expressly stipulated or a prior written approval of the QUEZON CITY GOVERNMENT is secure, the Purchase Order shall not be assigned or subjected to any other party or parties.				



<p>g) DAMAGES : The Supplier shall indemnify the Quezon City Government against all losses and claims for injuries or damages to any person or property whatsoever which may arise in consequence of the performance of this contract and against all claims, demands, proceedings, damages, costs, charges and expenses whatsoever in respect of or in relation thereto.</p> <p>h) DEFAULT : In the event that the supplier has not fully complied with its promise to provide the forgoing services, in the required specifications as agreed upon, or in any manner has failed to satisfactorily perform its obligations, the same shall be barred, upon proper recommendation, from future transactions with the QUEZON CITY GOVERNMENT, without prejudice to any legal action, if appropriate.</p> <p>i) VENUE OF ACTION : All disputes, claims or questions which may arise out of the Purchase Order shall be filed in the competent courts of Quezon City, at the Option of the QUEZON CITY GOVERNMENT, to the exclusion of all other courts.</p> <p>Terminology: *psi - pound per square inch cu.m - cubic meter Note: ISO 9001-2015, QUALITY MANAGEMENT SYSTEM</p>				
Total Quoted Amount				

Amount in Words:_____

_____.

OTHER INSTRUCTIONS/SPECIFICATIONS:	
1. ISO 9001-2015 Certification	

Delivery Period : Up to December 31, 2021

Warranty : _____

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address