



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



**REQUEST FOR QUOTATION
NEGOTIATED 53.9 SMALL VALUE PROCUREMENT**

DATE : SEPTEMBER 27, 2022
PROJECT NO. : QCDTRC(TAHANAN)-22-MSLI-354

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : PROCUREMENT OF VARIOUS MEDICAL SUPPLIES
Approved Budget of the Contract : P 537,705.00
End-User / Implementing Office : QUEZON CITY DRUG TREATMENT AND REHABILITATION CENTER (TAHANAN)

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 **SEPTEMBER 30, 2022 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 (2022);
- 4 Tax Clearance; and
- 5 Omnibus Sworn Statement prescribed by the **QC BAC- Goods and Services**
- 6 Income/Business Tax Return (for FY 2021) (For ABCs above P500,000.00)
- 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 issued by QC BAC- Goods and Services.**

(SGD) 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.
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	Testing Kit Drug – urine, Dual Met and THC, 40 kits per box	Box	25		
2	Cotton Ball – 300 pieces per pack, good quality	Pack	50		
3	Gauze Pad – 4 inches x 4 inches, 8 ply, sterile, 100% cotton, mesh, 28x24, 100 pieces per box	Box	10		
4	Gloves-Sterile – size: 8 inches, individually wrapped	Piece	100		
5	Gloves – non-sterile, medium, powder free, 100 pieces per box,	Box	10		
6	Syringe With Needle – 5cc syringe with gauge 23, 100 pieces per box	Box	1		
7	Dental Anesthesia – 1.8 ml cartridges, local anesthetics 200mg/10mcg/ml, 50 pieces per box	Box	10		
8	Povidone Iodine Solution – 10% 120ml per bottle	Bottle	50		
9	Hydrogen Peroxide – 120ml, 3% (10 volumes)	Bottle	25		
10	Dental Needle-Short – sterile, non-toxic, disposable, short, gauge 27, 100 pieces per box	Box	4		
11	Blood Pressure Aneroid Sphygmomanometer – handy, luminous gauge, adult inflation system, cotton cuff, with zipper case	Piece	2		
12	Dental Head Cap – 100 pieces per box	Box	2		
13	Surgical Face Mask – 3 ply with ear loop, disposable, non-woven, 50 pieces per box, FDA approved	Box	30		
14	Ethyl Alcohol – 70% solution, disinfectant/antiseptic, gallon, FDA approved	Gallon	450		

15	Surgical Face Mask – 3 ply with ear loop, disposable, non-woven, 50 pieces per box, FDA approved	Box	195		
				TOTAL	

Amount in Words: _____

Other Requirements:
1. 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

Email Address