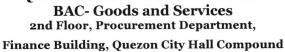


Republic of the Philippines **OUEZON CITY GOVERNMENT**





MAY 07, 2024

QCPC-24-DM-0178F

Date:

PR No :

REQUEST FOR QUOTATION

NEGOTIATED 53.9 SMALL VALUE PROCUREMENT

Project Title PROCUREMENT OF DRUGS AND MEDICINES AND OTHERS

Approved budget of

Name of Company

Address Contact No.

the Contract Php 189,855.08

End-User /

Implementing Office : **QUEZON CITY PROTECTION CENTER**

Item Nos.	Approved Budget for The Contract
1-9	P 102,721.20
10-14	P 87,133.88
TOTAL ABC	P 189,855.08

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 10, 2024, 10:00 A.M. Philippine Standard Time, together with the following documents of your company:

- PhilGEPS certificate (not expired at the time of opening of quotations); Business Registration (DTI/SEC) $\,$
- 2
- Mayor's/Business Permit (2024); 3
- 4 Tax Clearance; and
- 5 Omnibus Sworn Statement prescribed by QC BAC - Goods and Services
- Income/Business Tax Return (for FY 2023) (For ABCs above P500,000.00) 6
- 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.

NOTE: Submission of a Document Request List (DRL) is required prior to the issuance of the Long Brown Envelope.

> ATTY. DOMINIC B. GARCIA Officer-in-Charge Head, BAC Secretariat

> > QCG.PD.TSD.F.07

TERMS AND CONDITIONS

- 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.
- 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.
- 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.
- The City General Services Department (CGSD) shall have the right to inspect the goods.
- Non-submission of eligibility documents shall mean disqualification of Quotation.
- 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.
- 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	Paracetamol 500mg tab 1 box/100 pcs: Exp. 3 yrs.	box	5		
2	Ibuprofen 200mg tab: Exp. 3 yrs.	piece	126		
3	Loperamide capsules 2mg; Exp. 3 yrs.	piece	300		
4	Hyoscine N-butylbromide 10mg tab: Exp. 3 yrs.	piece	300		
5	Cetirizine tab 10mg: Exp. 3 yrs.	piece	300		
6	Phenylephrine HCL Chlorphenamine Maleate Paracetamol Forte; Exp. 3 yrs.	piece	300		
7	Silver Sulfadiazine 10mg/20g: Exp. 3 yrs.	piece	10		
8	Contraceptive Pills 2mg/35mcg: 21 tab/pack; Exp. 5 yrs.	pack	100		
9	Petroleum Jelly , 7g or 8.2ml mini container or sachet, 100% pure white formulated with Vit. E; Paraben free	piece	44		
10	Medication Kidney Basin Stainless Steel 12", 10", & 8"; 3 pcs/set	set	1		
11	Non-Woven Face Mask 3-Layer Filter. FDA Approved (Disposable) 50pcs/box; Expiry period: 3 years	box	190		
12	Autoclave tape 18mm x 50 meters/roll	roll	30		
13	Automatic Blood Pressure Monitor: Type: Upper Arm: Monitor Type, Digital Cuff Size: Pediatric cuff: battery; Li-Polymer; Dimension: 400W x 90H x 80mmD	unit	4		
14	Automatic Blood Pressure Monitor: Type: Upper Arm: Monitor Type, Digital Cuff Size: 32cm: battery; Li-Polymer; Dimension: 400W x 90H x 80mmD	unit	10		
		Total	Quote	d Amount	

10	Medication Kidney Basin Stainless Steel 12", 10", & 8"; 3 pcs/set	set	1		
11	Non-Woven Face Mask 3-Layer Filter. FDA Approved (Disposable) 50pcs/box; Expiry period: 3 years	box	190		
12	Autoclave tape 18mm x 50 meters/roll	roll	30		
13	Automatic Blood Pressure Monitor: Type: Upper Arm: Monitor Type, Digital Cuff Size: Pediatric cuff: battery; Li-Polymer; Dimension: 400W x 90H x 80mmD	unit	4		
14	Automatic Blood Pressure Monitor: Type: Upper Arm: Monitor Type, Digital Cuff Size: 32cm: battery; Li-Polymer; Dimension: 400W x 90H x 80mmD	unit	10		
		Total	Quoted	Amount	
Amou	nt in Words:				
Other R	equirements:				
1.	Copy of valid, current License to Operate from FDA and/or DOH Accreditation as Sup	plier, Distri	butor, or Ma	nufacturer of Dru	igs and Medicines.
2.					
3.	Statement of Warranty: For item nos. 1 – 7: Statement of the bidder specifying that the expiration do the date of delivery For item no. 8: Statement of the bidder specifying that the expiration dates date of delivery	ates of the d	rugs and me		
	Deli	ivery Perio Warrant	-	Thirty (30) Ca	lendar Days
			Signat	ure over printed	name
		(Office Tele	phone No./Fax/	Mobile No.

ivery Period Warranty	: -	Thirty (30) Calendar Days
,	_	
	Sign	ature over printed name
Off	ice Te	lephone No./Fax/Mobile No.
		Date
		Email Address