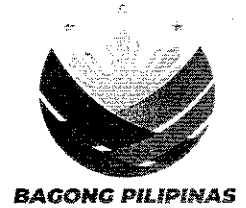




Republika ng Pilipinas
Lungsod Quezon

BIDS AND AWARDS COMMITTEE – GOODS & SERVICES
Second Floor, Civic Center Building F, Quezon City Hall Complex, Elliptical Road, Quezon City
8988-4242 local 8712 / 8710 / 8709
bacgoods.procurement@quezoncity.gov.ph



REQUEST FOR QUOTATION
NEGOTIATED PROCUREMENT
SECTION 53.1

DATE : NOVEMBER 14, 2024
PROJECT NO. : QCDTRC(TAHANAN)-24-DM-0722C

Name of Company : _____
Address : _____
Contact No. : _____
Project Title : PROCUREMENT OF VARIOUS DRUGS AND MEDICINES
Approved Budget of the Contract : Php864,565.00
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 **NOVEMBER 19, 2024, 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 (2024);
- 4 Tax Clearance; and
- 5 Omnibus Sworn Statement prescribed by the **QC BAC- Goods and Services**
- 6 Income/Business Tax Return (for FY 2023) (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.

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


MA. MARGARITA S. MEJIA, DPA
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. | Aluminum Hydroxide + Magnesium Hydroxide 200mg + 100mg tablet | tablet | 500 | | |
| 2. | Amlodipine, 5mg tablet | tablet | 2,000 | | |
| 3. | Amoxicillin, 500mg capsule | capsule | 1,000 | | |
| 4. | Ascorbic acid, 500mg tablet | tablet | 73,000 | | |
| 5. | Butamirate, 50mg MR tablet | tablet | 300 | | |
| 6. | Captopril, 25mg tablet | tablet | 200 | | |
| 7. | Cefalexin, 500mg capsule | capsule | 1,000 | | |
| 8. | Cefuroxime, 500mg tablet | tablet | 1,000 | | |
| 9. | Celecoxib, 200mg capsule | capsule | 500 | | |
| 10. | Cetirizine, 10mg tablet | tablet | 500 | | |
| 11. | Ciprofloxacin, 500mg tablet | tablet | 1,000 | | |
| 12. | Clindamycin, 300mg capsule | capsule | 1,000 | | |
| 13. | Clobetasol Cream 0.05%, 10g tube | tube | 200 | | |
| 14. | Cloxacillin, (as Sodium) 500mg capsule | capsule | 1,500 | | |
| 15. | Co-Amoxiclav (Amoxicillin + Potassium Clavulanate), 500mg + 125mg tablet | tablet | 1,000 | | |
| 16. | Diphenhydramine as Hydrochloride, 50mg capsule | capsule | 200 | | |
| 17. | Hyoscine (as N- butyl bromide) 10mg tablet | tablet | 100 | | |
| 18. | Ibuprofen 200mg capsule | capsule | 200 | | |
| 19. | Ketoconazole 2% 15g tube | tube | 200 | | |
| 20. | Lagundi, 600mg tablet | tablet | 1,000 | | |
| 21. | Lidocaine 2%, 50mL vial | vial | 2 | | |
| 22. | Loperamide Hydrochloride, 2mg capsule | capsule | 300 | | |
| 23. | Losartan K 50mg tablet | tablet | 2,000 | | |

| | | | | | |
|-----|--|---------|-------|-------|--|
| 24. | Mefenamic Acid, 500mg capsule | capsule | 1,000 | | |
| 25. | Mupirocin Ointment, 2%, 15g, tube | tube | 150 | | |
| 26. | Omeprazole, 40mg capsule | capsule | 500 | | |
| 27. | Oral Rehydration Salts (ORS 75- replacement) 4.1g sachet | sachet | 1,000 | | |
| 28. | Paracetamol, 500mg tablet | tablet | 1,000 | | |
| 29. | Permethrin lotion .5%, 60ml bottle | bottle | 100 | | |
| 30. | Salbutamol Sulfate 1mg, 2.5ml (unit dose) nebule | nebule | 30 | | |
| 31. | Tranexamic Acid, 500mg capsule | capsule | 200 | | |
| | | | | TOTAL | |

Amount in Words:

| |
|--|
| OTHER REQUIREMENTS: |
| <ul style="list-style-type: none">• Copy of valid, current License to Operate from FDA and/or DOH Accreditation as Supplier, Distributor or Manufacturer for Drugs and Medicines.• Copy of current and valid Certificate of Product Registration (CPR) for all items.• Statement of the bidder specifying that the expiration dates of the drugs and medicines from the date of delivery shall be not less than eighteen (18) months for oral respiratory drugs, intravenous and peritoneal solutions, topical, ophthalmologic and ENT preparations; one (1) to two (2) years for injectable; one (1) year for anesthetics with project title and project number |

Delivery Period : **Until December 31, 2024**

Warranty : _____

Signature over printed name

Office Telephone No./Fax/Mobile No.

Date

Email Address