



Republic of the Philippines
Department of Health
CENTER FOR HEALTH DEVELOPMENT
CaLaBaRZon
QMMC Compound, Project 4, Quezon City 1109
Telephone Nos. 8-249-2000
Email Add: bacsec.doh4a@gmail.com
BIDS AND AWARDS COMMITTEE



Request for Quotation
(NEGOTIATED PROCUREMENT UNDER **EMERGENCY CASES**)
RFQ 005-2020-A
(PROPOSED RECEIVING COUNTER WITH PROTECTIVE SHIELD, DOH CHD4A)

The Department of Health – CENTER FOR HEALTH DEVELOPMENT IV-A (CALABARZON) through its **Bids and Awards Committee (BAC)**, invites PhilGEPS Registered Contractors to submit its **SEALED QUOTATION** or send thru email at bacsec.doh4a@gmail.com for the following items on or before **August 10, 2020; 10:00 AM** at the 3rd floor Conference Room, Center for Health Development IV-A, QMMC Compound, Project 4, Quezon City.

Copies of the eligibility, technical and financial documents are also required to be submitted along with the quotation/proposal. (Please see attached Checklist of Requirements)

For clarification, you may contact the BAC Secretariat at (02) 8-249-2000.


NOEL G. PASION, MD, MPH, CESE
BAC Chairperson

Date: _____

NOEL G. PASION, MD, MPH, CESE
BAC Chairperson
DOH Center for Health Development CALABARZON
QMMC Compound, Project 4, Quezon City

Sir:

After having carefully read and accepted the terms and conditions in the Request for Quotation, hereunder is our quotation/s for the item/s as follow:

Item No.	Unit of Measure	ITEM AND DESCRIPTION	QTY	TOTAL ABC	(Please specify Origin/Brand/ Model)	UNIT PRICE	TOTAL PRICE
1	lot	Receiving Counter	1	23,123.33			
2	lot	Protective Shield (Glass on Aluminum Frame)	1	18,876.67			
		>>> nothing follows<<<					
		Total:		42,000.00			

The above-quoted price/s are inclusive of all costs and applicable taxes.

Name & Signature of Representative

Name of Company

Contact Number



Republic of the Philippines
Department of Health
Center for Health Development IV-A CALABARZON
BIDS AND AWARDS COMMITTEE
QMMC Compound, Project 4, Quezon City
Tel.: 440-3551/440-3372



REQUEST FOR QUOTATION

August 3, 2020

The Department of Health Center for Health Development IV-A through the Bids and Awards Committee (BAC), invites **all eligible contractors** to submit a **Sealed Quotation** for the following projects for open negotiation to select the **best and final offer** on or before **August 10, 2020 10:00am** at the 3rd Floor Conference Room, Center for Health Development IV-A, QMMC Compound, Project 4, Quezon City or email at **bacsec.doh4a@gmail.com**

RFQ No.	Name of Projects	Location	Approved Budget of the Contract	Calendar Days
RFQ No. 2020-E-025-A	Installation of Insecticide Treated Screen Net for Malainin Isolation Facility	Brgy. Malainin, Ibaan, Batangas	P58,200.00	15 CDs
	Installation of Dry Wall Partition for Malainin Isolation Facility		P91,890.00	
		TOTAL:	P150,090.00	
RFQ No. 004-2020-A	Construction of Wash Area and Shower Room at Swabbing Testing Area	DOH – CHD Calabarzon	P180,000.00	30 CDs
RFQ No. 005-2020-A	Proposed Receiving Counter with Protective Shield, DOH CHD4A	DOH – CHD Calabarzon	P42,000.00	15 CDs
RFQ No. 006-2020	Installation of Acrylic Partition at Second Floor Admin Building	DOH-CHD CaLaBaRZon	P381,635.52	15 CDs
RFQ No. 007-2020	Supply and Installation of Elevated Water Tank (1000Gallons) for Malainin Isolation Building	Brgy. Malainin, Ibaan, Batangas	P500,000.00	15 CDs

Please see attached Checklist of Requirements

For clarification, you may contact the BAC Secretariat at 8249-2000 local 4411.

NOEL G. PASION, MD, MPH, CESE
Chairperson, Bids and Awards Committee



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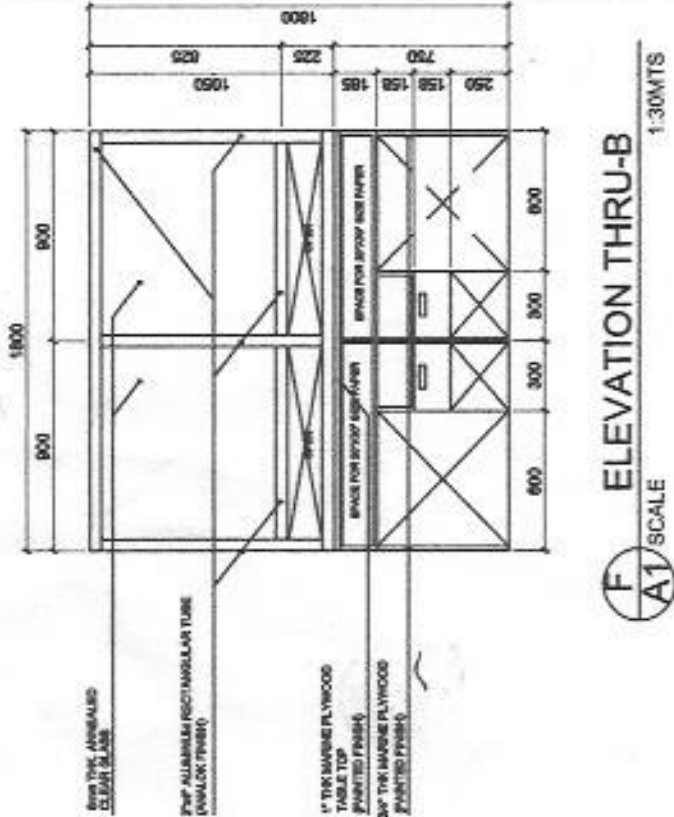
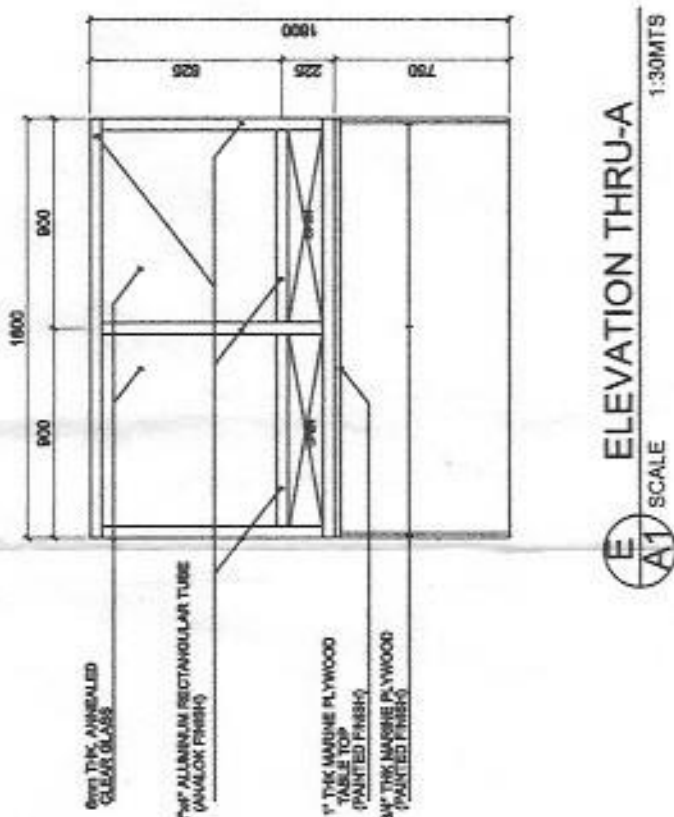
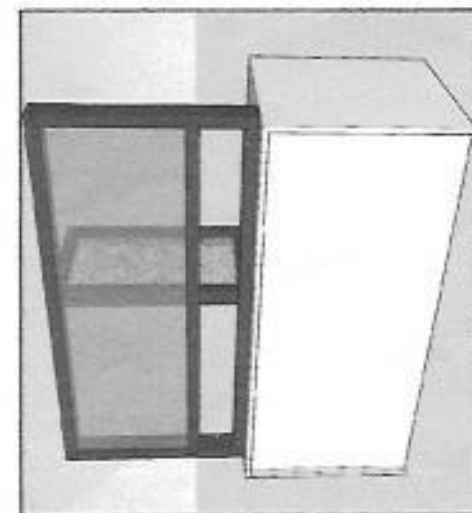
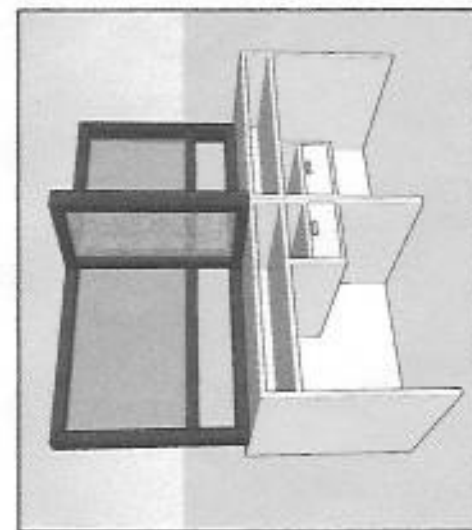
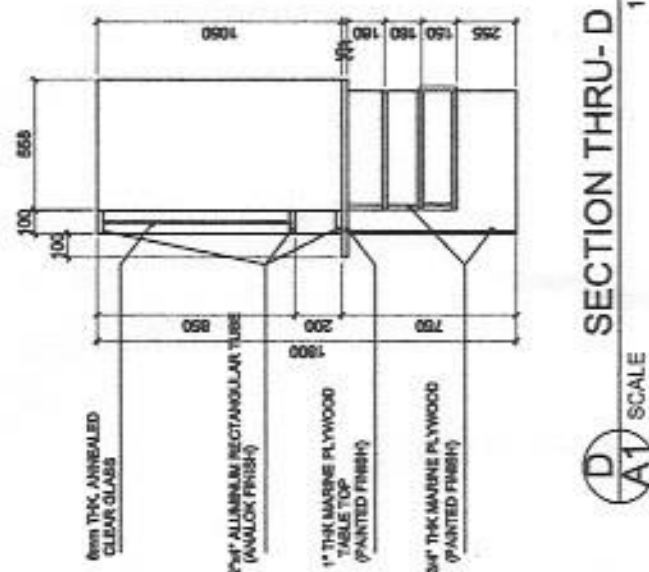
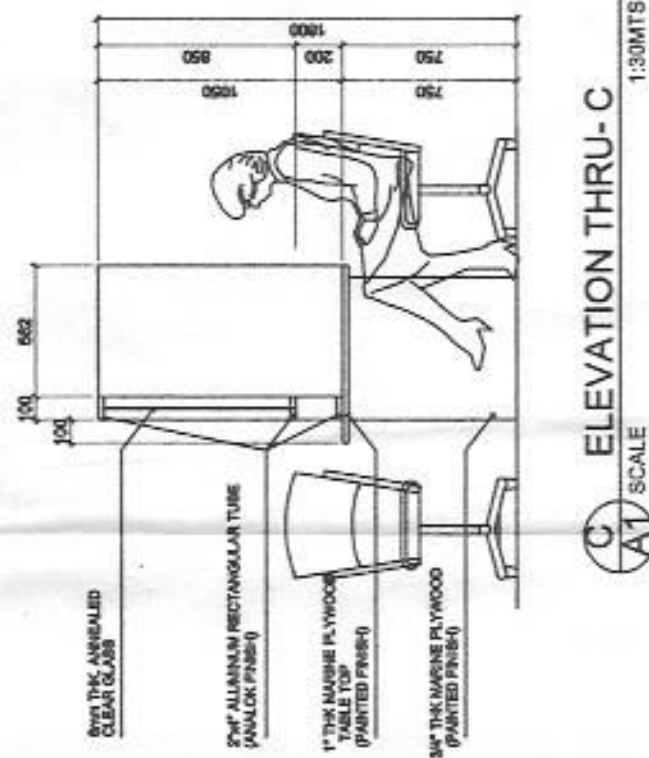
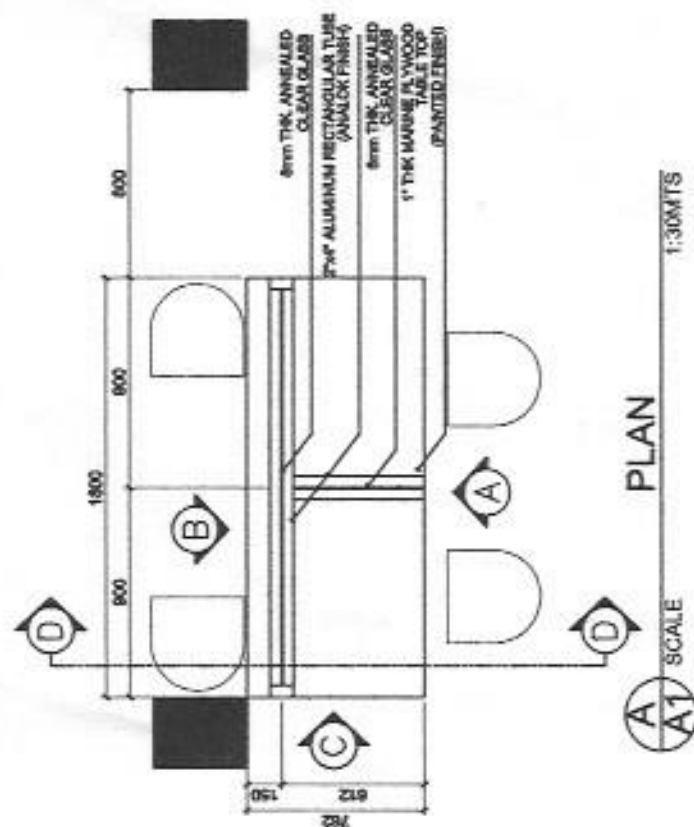
CHECKLIST OF REQUIREMENTS
(NEGOTIATED PROCUREMENT UNDER EMERGENCY CASES)

Name of Company: _____

- ☐ 1. PCAB License (Cat. "C" & "D" Small B or higher)
- ☐ 2. Mayor's Permit (2020)
- ☐ 3. PhilGEPS Registration Certificate (Platinum)
- ☐ 4. Omnibus Sworn Statement (notarized)
- ☐ 5. Income Tax Return of preceding tax year OR Business Tax Returns (Value Added Tax or Percentage Tax Return covering the previous six (6) months.
- ☐ 6. Company Profile
- ☐ 7. Detailed Estimate and Program of Works
- ☐ 8. Net Financial Contracting Capacity (NFCC) if ABC is above P500,000.00
- ☐ 9. Bid Form

Checked by:

BIDS AND AWARDS COMMITTEE							DATE



NOTE: PLEASE VERIFY ACTUAL DIMENSIONS ON SITE

<p>Department of Health Center for Health Development IV-A CALABARZON DOH-4A, CMMC Compound, Project 4, Quezon City</p>	<p>PROJECT TITLE</p> <p>PROPOSED RECEPTION COUNTER WITH PROTECTIVE SHIELD</p> <p>LOCATION: DOH-4A, CMMC Compound, Project 4, Quezon City</p>	<p>PREPARED BY:</p> <p>ERIC JOSEPH M. ALA ARCHITECT</p>	<p>REVIEWED BY:</p> <p>RONALD L. DORDT ENGINEER III / PM / HEAD</p>	<p>APPROVED BY:</p> <p>EDUARDO S. JANAHO, MD, MPH, DESO II PAULA PAZ M. STODOLCO, MD, MPH, DESO II ASSISTANT REGIONAL DIRECTOR</p>	<p>SHEET CONTENT:</p> <p>PERSPECTIVES PLAN ELEVATION SECTION</p>	<p>SHEET NUMBER</p> <p>A-1</p>
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