



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



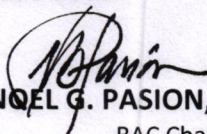
Request for Quotation

NEGOTIATED PROCUREMENT UNDER EMERGENCY CASES PROCUREMENT OF MEDICAL EQUIPMENT RFQ 2020-E-032

The Department of Health – CENTER FOR HEALTH DEVELOPMENT IV-A (CALABARZON) through its Bids and Awards Committee (BAC), invites PhilGEPS registered suppliers to submit its **SEALED QUOTATION** for the following item/s on or before **September 30, 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 (**hard copies**) 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	unit	IV Infusion Pump	10	1,140,000.00			
2	unit	Syringe Pump	2	288,000.00			
3	unit	UV Light Bulb	2	57,600.00			
4	unit	Infant Incubator	2	1,680,000.00			
5	unit	Infant Radiant Warmer	2	1,200,000.00			
6	unit	Phototherapy (Bililight)	1	240,000.00			

Item No.	Unit of Measure	ITEM AND DESCRIPTION	QTY	TOTAL ABC	(Please specify Origin/Brand/ Model)	UNIT PRICE	TOTAL PRICE
7	unit	Fetal Doppler (Digital)	1	6,000.00			
8	unit	Portable Blood Gas Analyzer	1	800,000.00			
9	unit	Agglutination Viewer	1	130,000.00			
10	unit	Plasma Extractor	1	30,000.00			
11	unit	Tube Sealer Portable (Blood Bag)	1	120,000.00			
12	unit	Gel Method for Cross matching (DG Term)	1	850,000.00			
13	unit	Platelet Agitator/ Incubator	1	350,000.00			
		*** nothing follows***					
		TOTAL		6,891,600.00			
DELIVERY PERIOD: 7 TO 15 CALENDAR DAYS UPON RECEIPT OF P.O.							

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

Name/Signature of Representative

Name of Company

Contact Number

CHECKLIST OF REQUIREMENTS
(Negotiated Procurement after Emergency Cases)

NAME OF COMPANY: _____

- ☐ 1. **REQUEST FOR QUOTATION / BID PROPOSAL**
- ☐ 2. **PLATINUM CERTIFICATE OF PHILGEPS REGISTRATION** with attached valid: (a) Mayor's Permit, (b) BIR Registration Certificate, (c) Tax Clearance Certificate, and (d) DTI Certificate
- ☐ 3. **INCOME TAX RETURN** of the preceding tax year OR Business Tax Returns (Value Added Tax or Percentage Tax Return covering the previous six (6) months.
- ☐ 4. **OMNIBUS SWORN STATEMENT** (Notarized)
- ☐ 5. **COMPANY PROFILE** for new suppliers
- ☐ 6. **TECHNICAL SPECIFICATIONS** using the provided form, which also includes the following:
- a. **Production / Delivery schedule;**
 - b. **Manpower Requirements and Organizational Structure**
 - c. **Distributorship Agreement** with foreign manufacturer or **Manufacturer's Certificate** that the supplier/bidder is the authorized distributor in the Philippines duly authenticated by the Philippine Territorial Consulate from the country of origin;
 - and-
 - Notarized Distributorship Agreement** between the Distributor Importer/Wholesaler and the Bidder.
 - d. **Valid FDA License to Operate (LTO)**
- ☐ 7. **ADDITIONAL REQUIREMENTS:**
- A. For Medical Devices/Equipment/Reagents**
 - a) Certificate of Exemption or CPR as per FDA Memo Circular No. 2020-001
 - b) Copy of ISO-13485 of the Manufacturer (Photocopy of Authenticated copy)
 - c) Manufacturer's Certification (on warranty issue in case of change in supplier years of existence in the market)
 - d) State the Brand, Model and Country of origin of the items offered
 - e) Attach a copy of contract for the in-house technician in letter d., if applicable
 - f) Stainless steel grade AISI 410 or higher with matte finish
 - g) Brand must be laser printed in the instrument
 - h) Sample product must be submitted within 3-4 days after receipt of Notice of Post-Qualification
 - B. For Food, Drugs and Medicines**
 - a) Valid Certificate of Product Registration (CPR)
 - b) Certificate of Compliance to the EDPMS (Administrative Order No. 2016-0009 Revised Implementing Guidelines for the Electronic Drug Price Monitoring System (EDPMS))
 - c) Valid Certificate of Good Manufacturing Practices (GMP) of the Manufacturer for Food, Drugs and Medicines (local and foreign manufacturer issued by FDA or its counterpart)
- NOTE:**
- Winning bidder shall submit a Re-Issued copy of the CPR.
 - For expired/near expiry CPR, please attach the Official Receipt of payment and the application form.
 - Payment for the analysis shall be shouldered by the supplier.
- C. For Cosmetic Products and Household Urban Pesticides**
 - a) Valid Certificate of Notification
 - b) Valid Certificate of Good Manufacturing Practices (GMP) of the Manufacturer for Cosmetics (local and foreign manufacturer issued by FDA or its counterpart)
 - D. For Van Rental Services**
 - a) Valid LTRFB Franchise or application

Checked by :

BIDS AND AWARDS COMMITTEE							DATE