



## REQUEST FOR QUOTATION

Date: 15 May 2023 RFQ No.: R1 100-23-03-712

| Name of Company:              |  |
|-------------------------------|--|
| Address:                      |  |
| Name of Store/Shop:           |  |
| Address:                      |  |
| TIN:                          |  |
| PhilGEPS Registration Number: |  |

The City Government of Pasig, through the Bids and Awards Committee (BAC), intends to procure Supply and Delivery of Various Medical Supplies - PCCH with an Approved Budget for the Contract (ABC) of Php 415,490.00, in accordance with Section 53.9 of the 2016 revised Implementing Rules and Regulations of Republic Act No. 9184. Please quote your best offer for the item in the table below.

The Project shall be awarded as One Project having several items grouped into several lots, which shall be awarded as separate contracts per lot. Quotations received exceeding each total Cost per Item and/or the total Approved Budget for the Contract shall be rejected.

|             | Item Description  | Brand Name* (PLEASE DO NOT LEAVE BLANK) | QTY | иом  | Approved Budget |               | Price Offer  |               |
|-------------|---|---|-----|------|-----------------|---------------|--------------|---------------|
| Item<br>No. |   |   |     |      | Unit<br>Cost    | Total<br>Cost | Unit<br>cost | Total<br>Cost |
|             | LINE ITEMS  |   |     |      |                 |               |              |               |
| 1           | Introducer Bougie Fr. 10 (Pediatric),  - 70cm, Pediatric size features calibrated markings on both ends allowing it to be used as a straight or coude tip                           |   | 20  | pcs  | 1,100.00        | 22,000.00     |              |               |
|             | LOT 1   |   |     |      |                 |               |              |               |
| 2           | Mini D-Fend Water Trap for Mini C Modules, - Compatible with GE Aespire 7100 Anesthesia Machine, 10pcs per box  |   | 3   | box  | 24,000.00       | 72,000.00     |              |               |
| 3           | Gas Sampling Line, - single disposable, 10pcs per pack  |   | 3   | pack | 6,000.00        | 18,000.00     |              |               |
|             | LOT 2   |   |     |      |                 |               |              |               |
| 4           | Endotracheal Tube with Cuff 3.5 (North-<br>Facing), sterile,  - with split-resistant radiopaque lines,<br>barrel shaped cuffs, with murphy<br>eye and bull-nose tip, kink resistant |   | 30  | pcs  | 470.00          | 14,100.00     |              |               |
| 5           | Endotracheal Tube with Cuff 4.0 (North-<br>Facing), - sterile, with split-resistant<br>radiopaque lines, barrel shaped  |   | 20  | pcs  | 470.00          | 9,400.00      |              |               |



|    | cuffs, with murphy eye and bull-<br>nose tip, kink resistant  |    |     |          |          |  |
|----|---|----|-----|----------|----------|--|
| 6  | Endotracheal Tube with Cuff 4.5 (North-<br>Facing),  - sterile, with split-resistant radiopaque lines, barrel shaped cuffs, with murphy eye and bull- nose tip, kink resistant          | 20 | pcs | 470.00   | 9,400.00 |  |
| 7  | Endotracheal Tube with Cuff 5.0 (North-<br>Facing),  sterile, with split-resistant radiopaque lines, barrel shaped cuffs, with murphy eye and bull- nose tip, kink resistant            | 20 | pcs | 470.00   | 9,400.00 |  |
| 8  | Endotracheal Tube with Cuff 5.5 (North-Facing),  - sterile, with split-resistant radiopaque lines, barrel shaped cuffs, with murphy eye and bull-nose tip, kink resistant               | 20 | pcs | 470.00   | 9,400.00 |  |
| 9  | Endotracheal Tube with Cuff 6.0 (North-Facing),  - sterile, with split-resistant radiopaque lines, barrel shaped cuffs, with murphy eye and bull-nose tip, kink resistant               | 20 | pcs | 470.00   | 9,400.00 |  |
| 10 | Facing),  - sterile, with split-resistant radiopaque lines, barrel shaped cuffs, with murphy eye and bull- nose tip, kink resistant   | 20 | pcs | 470.00   | 9,400.00 |  |
| 11 | Endotracheal Tube with Cuff 7.0 (North-Facing),  - sterile, with split-resistant radiopaque lines, barrel shaped cuffs, with murphy eye and bull-nose tip, kink resistant               | 20 | pcs | 470.00   | 9,400.00 |  |
| 12 | Endotracheal Tube with Cuff 8.0 (North-<br>Facing),  - sterile, with split-resistant<br>radiopaque lines, barrel shaped<br>cuffs, with murphy eye and bull-<br>nose tip, kink resistant | 10 | pcs | 470.00   | 4,700.00 |  |
| 13 | Endotracheal Tube Curved Reinforced with Cuff 3.5 (Armored),  - sterile, murphy eye, high-volume, low-pressure cuff   | 5  | pcs | 1,600.00 | 8,000.00 |  |
| 14 | Endotracheal Tube Curved Reinforced with Cuff 4.0 (Armored), - sterile, murphy eye, high-volume, low-pressure cuff  | 5  | pcs | 1,600.00 | 8,000.00 |  |
| 15 | Endotracheal Tube Curved Reinforced with Cuff 4.5 (Armored), - sterile, murphy eye, high-volume, low-pressure cuff  | S  | pcs | 1,600.00 | 8,000.00 |  |
| 16 | Endotracheal Tube Curved Reinforced with Cuff 5.0 (Armored), sterile, murphy eye, high-volume, low-pressure cuff  | 5  | pcs | 1,600.00 | 8,000.00 |  |

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| 17 | Endotracheal Tube Curved Reinforced with Cuff 6.5 (Armored), - sterile, murphy eye, high-volume, low-pressure cuff                                       | 5  | pcs  | 1,600.00 | 8,000.00  |  |
|----|--|----|------|----------|-----------|--|
| 18 | Endotracheal Tube Curved Reinforced with Cuff 7.0 (Armored), - sterile, murphy eye, high-volume, low-pressure cuff                                       | 5  | pcs  | 1,600.00 | 8,000.00  |  |
| 19 | Endotracheal Tube Curved Reinforced with Cuff 7.5 (Armored), - sterile, murphy eye, high-volume, low-pressure cuff                                       | 5  | pcs  | 1,600.00 | 8,000.00  |  |
| 20 | Endotracheal Tube Curved Reinforced with Cuff 8.0 (Armored), - sterile, murphy eye, high-volume, low-pressure cuff                                       | 5  | pcs  | 1,600.00 | 8,000.00  |  |
| 21 | Endotracheal Tube with Cuff 3.5,  - sterile, with split-resistant radiopaque lines, barrel shape cuffs, with murphy eye and bull-nose ti, kink resistant | 30 | pcs  | 160.00   | 4,800.00  |  |
| 22 | Oral Airway Size 0 (Blue), - sterile   | 30 | pcs  | 80.00    | 2,400.00  |  |
| 23 | Oral Airway Size 00 (Pink), - sterile  | 30 | pcs  | 80.00    | 2,400.00  |  |
|    | LOT 3  |    |      |          |           |  |
| 24 | CASTING TAPE MADE with FIBER GLASS 2" (BLUE), - 2 inches x 5 yards   | 10 | roll | 270.00   | 2,700.00  |  |
| 25 | CASTING TAPE MADE with FIBER GLASS 2" (PURPLE), - 2 inches x 5 yards   | 10 | roll | 270.00   | 2,700.00  |  |
| 26 | CASTING TAPE MADE with FIBER GLASS 3" (GREEN), - 3 inches x 5 yards  | 10 | roll | 300.00   | 3,000.00  |  |
| 27 | CASTING TAPE MADE with FIBER GLASS 3" (PINK), - 3 inches x 5 yards   | 10 | roll | 300.00   | 3,000.00  |  |
| 28 | (RED), - 4 inches x 5 yards  | 20 | roll | 360.00   | 7,200.00  |  |
| 29 | CASTING TAPE MADE with FIBER GLASS 5" (PURPLE), 5 inches x 5 yards   | 20 | roil | 400.00   | 8,000.00  |  |
| 30 | STOCKINETTE 2" x 27 YARDS  | 2  | roll | 720.00   | 1,440.00  |  |
| 31 | STOCKINETTE 3" x 27 YARDS  | 2. | roll | 910.00   | 1,820.00  |  |
| 32 | STOCKINETTE 4" x 27 YARDS  | 3  | roll | 1,210.00 | 3,630.00  |  |
| 33 | STOCKINETTE 6" x 27 YARDS  | 2  | roll | 1,520.00 | 3,040.00  |  |
|    | LOT 4  |    |      |          |           |  |
| 34 | Hydrocolloid Wound Dressing,  - sterile 4in x 4in, control gel formula, thick, 5pcs/box  | 10 | box  | 1,740.00 | 17,400.00 |  |
| 35 | Hydrocolloid Wound Dressing, - sterile 8in x 8in, control gel formula, thick, 5pcs/box   | 6  | box  | 5,800.00 | 34,800.00 |  |

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| <b>Note:</b> Other terms and conditions are stipulated in the attached Terms of Reference, if any. |  | Т | otal | 415,490.00 |           |  |
|--|--|---|------|------------|-----------|--|
| 38   | Enhanced Hydro fiber Dressing, - with Silver and Strengthening fiber with anti-biofilm 6in x 6in, 5pcs/box   | 2 | box  | 11,280.00  | 22,560.00 |  |
| 37   | Enhanced Hydro fiber Dressing,  - with Silver and Strengthening Fiber with anti-biofilm 4in x 4in, 10pcs/box | 2 | box  | 11,900.00  | 23,800.00 |  |
| 36   | - sterile, 4in x 4in control gel formula,<br>extra thin, 10pcs/box   | 6 | box  | 1,700.00   | 10,200.00 |  |

Indicate the BRAND NAME or MANUFACTURER NAME and the specific MODEL to be offered or attach a BROCHURE for the offered item; items including but not limited to clothing, vehicle, equipment, devices, electronics, machines, drugs,

medicines, medical supplies must be branded or at the very least, manufacturer shall be indicated.

Submit this Quotation (Accomplished and duly signed by the Owner or the respective Authorized Representative indicated in the Secretary's Certificate/Special Power of Attorney) not later than the closing date specified in the Bid Notice Abstract posted in PhilGEPS website along with the following documents:

- Mayor's/Business Permit (or a recently expired Mayor's/Business permit together with the official receipt as proof that the prospective bidder has applied for renewal within the period prescribed by the concerned local government unit subject to submission of the Mayor's Permit before the award of contract). The nature of business as stated in the Mayor's/Business Permit should at the very least be similar or related to the project to be bid.
- **PhilGEPS Registration Number**
- Income Tax Return Latest Income or Business Tax Returns filed and paid through the BIR Electronic Filing and Payment System (EFPS).

In accordance with Revenue Regulation No. 3-2005, the above-mentioned tax returns shall refer to the following:

- 1. Latest Income Tax Return (ITR) For participants already with an Annual ITR, latest ITR shall refer to the ITR for the preceding Tax Year be it on a calendar or fiscal year. For new establishments which, therefore, have no annual ITR yet, it shall refer to the most recent quarter's ITR.
- 2. Latest Business Tax Return refers to the Value Added Tax (VAT) or Percentage Tax returns covering the previous six (6) months.
- Accomplished and notarized Omnibus Sworn Statement (https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement(Revised).docx)
- Proof of Authorization: Secretary's Certificate if corporation, or Special Power of Attorney, if individual.

## **ADDITIONAL REQUIREMENTS:**

For Procurement of Drugs and Medicines:

Documents from the Food and Drug Administration (FDA):

- a. Certificate of Product Registration;
- b. Certificate of Good Manufacturing Practice;
- c. License to Operate;
- d. Batch Release Certificate (for vaccines, toxoids and immunoglobulins only) (to be submitted upon delivery]; and
- e. Certificate of Analysis (for anesthesia and antibiotics) [to be submitted upon delivery].



If the Supplier is not the Manufacturer, a certification from the Manufacturer that the supplier is an authorized distributor/dealer of the products/items.

Please submit the accomplished Quotation and required documents on or before the deadline of submission at the Bids and Awards Committee (BAC) through the Procurement Management Office (BAC Secretariat Office), 4th Floor, Pasig City Hall, San Nicolas, Pasig City.

All documents should be submitted in a sealed brown envelope addressed to the "Bids and Awards Committee, 4th Floor, Pasig City Hall", and properly marked with the Project Title as provided herein.

The CITY GOVERNMENT OF PASIG reserves the right to reject any and all bids, declare a failure of bidding, or not award the contract at any time prior to contract award in accordance with Sections 35.6 and 41 of the 2016 revised IRR of RA No. 9184, without thereby incurring any liability to the affected

bidder or bidders. For any clarification, you may contact us at telephone no. (02) 8641-1111 / (02) 8643-1111 loc. 1461 or email address at bidsandawards@pasigcity.gov.ph Officer in Charge, Procurement Management Office I hereby certify that I have read and agree to this Request for Quotation, its Terms of Reference, and Bid Bulletin/s, if any. I further certify that the products to be delivered will conform to the specifications stated in the Item Description. Conforme: Position Signature over Printed Name Duly authorized to sign quotation/offer for and on behalf of \_ (Please indicate Company Name)





## **NURSING SERVICE OFFICE**

## TERMS OF REFERENCE FOR VARIOUS MEDICAL SUPPLY FOR THE USE OF PASIG CITY CHILDREN'S HOSPITAL (SMALL VALUE PROCUREMENT)

- i. Must comply to the eligibility requirements set forth by the BAC.
- 2. Minimum of 2 years expiration date of expiry, must be indicated in each items and packaging upon delivery
- 3. Must be delivered directly to the institution with the presence of one (1) Asset staff (city hall) and one (1) PSR staff.
- 4. Terms of delivery will be 30 calendar days once notice to proceed and approved purchase order are released.
- 5. Terms of Payment 45 days once delivery is completed.

Prepared by:

MARIA CRISTINA D. PANUAYAN, RN, MAN. Nurse Supervisor/Procurement Focal Person