PGH Form No. Q2500003 Rev.01 Eff01 July 2021



## PHILIPPINE GENERAL HOSPITAL

The National University Hospital
University of the Philippines Manila
PURCHASING OFFICE
Taft Avenue, Manila

"PHIC-Accredited Health Care Provider"
ISO 9001 Certified

## REQUEST FOR QUOTATION / PROPOSAL

Date:	24 OCTOBER 20	<u>23</u>								
Purcha	se Request No.:	PUR23-09-0874								
Mode of Procurement:		NEGOTIATED PROCUREMENT as per Section 53.9 of 2016 Revised IRR of R.A. No. 9184. (Small Value)								
BUSIN	ESS NAME									
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		•								
-										
		ment price inclusive of VAT for the ite								
		by your representative at the PL HOSPITAL, Taft Avenue, Manila			G OFFICE 2n n 3:00pm on	d flr. Righ		e Wingi		
	General Conditions	S:								
	1 All entries must be typewritten or in print.									
2 Delivery Period: (state delivery period) calendar days.										
3 Warranty shall be for a minimum period of six (6) months for the supplies and materials, one (1) year for equipment from the date of acceptance by the procuring entity.										
4 Bidders must indicate the BRAND and MODEL NUMBER offered when appropriate.										
5 Price validity shall be for a period of 90 calendar days from the date of opening of quotation/proposal.										
6 Documentary requirements should be attached upon submission of the quotation/proposal										
x Valid Business/Mayor's Permit x PhilGEPS Registration Number/Certificate										
Latest Business/Income Tax Return  Notarized Omnibus Sworn Statement  Supplier is required to submit single bid/offer only for each item. Two or more bids/offer is automatically										
disqualified.										
8 OTHERS										
For further information, you may call at (02) 8554-8400 local No. (3023) and look for										
Mrs. THELMA C. BERNARDO.										
	madus									
JULIE	T E. MADIZ	•								
Acting 1	Head J									
	C)	O. D	1: -:	/0		anu Divis	ion		, v	
END-USER: Department of Rehabilitation Medicine/Occupational Therapy Division										
		Item Description			Unit Price	Quoted Unit		ment of pliance	Remarks	
Item No.	2	Tem 2 comprises	Qty	UOM	(PHP)	Price	Yes	No	(Brand and Specifications)	
140.	SUPPLY and D	ELIVERY of ELECTRIC	Q cy	00112	(2222)	11100			решене	
	COOKING RAN		2	units	40,000.00					
			-	-			-			
	PLEASE REFER T	TO ANNEX FOR OTHER TECHNICA	L L							
	SPECIFICATION	and TERMS and CONDITIONS								
			-				-	-		
			<del>                                     </del>			<u> </u>				
Approved Budget for the Contract: 80,000.00										
		9								
		I/We, the undersigned Supplier, hereby Ol	FFER	to supply	deliver  perform	the above d	escribed	items.		
		y:								
		n: re								

END-USER: Department of Rehabilitation Medicine/Occupational Therapy Div. ANNEX 1 Statement of Remarks Unit Price **Ouoted Unit** Compliance (Brand & Item No. Item Description Qty UOM (PHP) Price Yes No Specifications) SUPPLY and DELIVERY of Electric Cooking Range. 2 units 40,000.00 TECHNICAL SPECIFICATIONS: • 4 (145mm) Electric Hotplate with Pilot Light Indicator • Electric Grill with Rotisserie/Oven Light Stainless Steel Body • Weight - 36 kg Dimensions L 54 x W 50 X H 88 (cm) • Electric Oven, selector type Thermostat Control • Electric Grill with Rotisserie/Oven Light • 3 Prong Electrical Plug • External Dimension (L x W x H): 54 x 50 x 88 • Oven Dimension (L x W x H): 42 x 39.5 x 33 • Oven Capacity: 49 Liters Oven Dimension (mm): 330 (H) X 420 (D) X 395 (W) • 4000 Watts • Type I Rectangular Prong Inverted V (20 Amperes) Heavy Duty Angle Plug Amperes) Suitable for light Metals, carpentry and woodworking Maximum jaw opening 60mm • 360 degree locking O-shape swivel base Manufactured from die cast iron • Equipped with a (45mmx32mm) anvil Material: Alloy Steel Brand: Country of Origin: Delivery Date: Approved Budget for the Contract: 80,000.00 Total Amount of Quotation (in Words & in Figures) I/We, the undersigned Supplier, hereby OFFER to supply/deliver/perform the above described items. Name of Company:

Name of Representative: Position / Designation:

Signature

