PGH Form No. Q-250003 Rev.01; Eff 01 Jul 2021 UNIVERSITY OF THE PHILIPPINIS AUGUST PG H

PHILIPPINE GENERAL HOSPITAL

The National University Hospital University of the Philippines Manila <u>PURCHASING OFFICE</u>

Taft Avenue, Manila

PHIC-Accredited Health Care Provider ISO 9001 Certified

REQUEST FOR QUOTATION / PROPOSAL

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		.72													
S	Please quote at your government price inclusive of VAT for the item/s listed below. It will be appreciated if you submit your quotation duly signed by your representative at the <u>Purchasing Office, 2nd Floor Right Service Wi</u> Philippine General Hospital, Taft Avenue, Manila, not later than <u>3:00 PM, 15 November 2023.</u>														
(General Conditions:														
_	1. All entries must be typewritten	or in pri	nt.												
	2. Delivery Period: Within seven	(7) cale	ndar da												
3	3. Warranty shall be for a minimu				supplies a	ind mat	erials, or	ne (1) year for equi							
	from the date of acceptance by t	he proc	uring ent	tity.											
	4. Bidders must indicate the BRAN	ID and N	IODEL N	UMBER offered v	nen appr	opriate.	motation	/nronosal							
6	Price validity shall be for a period of 90 calendar days from the date of opening of quotation/proposal. Documentary requirements should be attached upon submission of the quotation / proposal.														
C	Valid Business / Mayor's			✓ PhilGEPS Re	egistration	n Numbe	er/Certifi	cate							
	✓ Latest Business / Income		turn [✓ Notarized C	_										
7	7. Supplier is required to submit	single	bid / of					s / offer is automa							
(disqualified.	Jingie	bid / oil	ier omy for each											
8	8. Others:														
				submitted as may	y be requi	red.									
	b. Expiration date at least six (6) months.														
	For further information, you may cal			400 local <u>3021</u> an	d look for	· Mr/Ms	. <u>Cristy P</u>	?. Cruz.							
J	For further information, you may cal	l at (02)	8554-84	400 local <u>3021</u> an				?. Cruz.							
J A	For further information, you may cal	l at (02)	8554-84	ment of Medicin		mmuno Statem	logy) ent of	Remarks							
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J M	For further information, you may cal JULIET E. MADIZ Acting Head Item Description Supply and Delivery of	l at (02)	8554-84 Depart	ment of Medicin Unit Price	e (MRL I	mmuno Statem Compl	logy) nent of liance	Remarks (Brand and							
J A	JULIET E. MADIZ Acting Head Item Description Supply and Delivery of Various Chemicals and Reagents for MRL	l at (02)	8554-84 Depart	ment of Medicin Unit Price	e (MRL I	mmuno Statem Compl	logy) nent of liance	Remarks (Brand and							
J A	JULIET E. MADIZ Acting Head Item Description Supply and Delivery of Various Chemicals and Reagents for MRL Immunology	l at (02)	8554-84 Depart	ment of Medicin Unit Price	e (MRL I	mmuno Statem Compl	logy) nent of liance	Remarks (Brand and							
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TERMS AND CONDITIONS:

- 1. Bidders shall provide correct and accurate information required in this form.
- 2. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable.
- 3. Quotations exceeding the Approved Budget for the Contract shall be rejected.
- 4. Award of contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
- 5. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by you or any of your authorized representative/s.
- 6. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
- 7. The UPM-PGH shall have the right to inspect and/or test the goods to confirm their conformity to the technical specifications.
- 8. The UPM-PGH shall assumes no responsibility whatsoever to compensate or indemnify any supplier for expenses incurred in the preparation of Quotations/Proposals.
- 9. In case of two or more bidders are determined and declared as Lowest Calculated and Responsive Quotation, the UPM-PGH shall adopt and employ "draw lots" as the tie-breaking method to finally determine the winning provider in accordance with GPPB Circular 06-2005.
- 10. If the AWARDEE fails to effect delivery with the prescribed period, the UPM-PGH may upon its discretion, extend delivery period of subject, however, to the imposition of appropriate liquidated damages, the amount of which shall be at least equal to one-tenth of one percent (0.01%) of the cost of the unperformed portion for every day of delay, collectible from any money due or maybe due to the supplier/contractor. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, the UPM-PGH may rescind or terminate the contract, without prejudice to other courses of action and remedies open to it. If the AWARDEE, however, fails to effect completed delivery within the extended period, the UPM-PGH shall have the right to cancel said contract and shall constitute a ground for disqualification of the AWARDEE from future biddings, without prejudice to the imposition of other sanctions provided for under 2016 Revised IRR.
- 11. The UPM-PGH reserves the rights to reject any or all bids or not award the contract, to waive any formality or defect therein and to accept any or all offers that may be considered most advantageous to the Government.
- 12. Compliance with Republic Act (R.A.) 9184 and other applicable laws.

	UNDERTAKING
I/We undertake, if our quotation/proposa /Terms and Conditions contained in the Re	l is accepted, to deliver the items in accordance with the General quest for Quotation/Proposal.
Name of Company: Address: Name of Representative: Position / Designation:	Office Tel. No.: Fax / Mobile No.: e-Mail Address: Date:
Signature	

End-User: <u>Department of Medicine - MRL Immunology</u>
PR No.: <u>PUR23-10-0965</u> Statement of Item **Unit Price** Quoted Remarks UOM Qty Item Description Compliance No. (Php) **Unit Price** (brand and specifications) Yes No бох **Washing Solution** 3 3,200.00 > 1 x 6 bottles 1 бох Sample Diluent 2,500.00 > 1 x 6 bottles 2 IgM Conjugate бох 14,000.00 $> 6 \times 4.8 \text{ mL}$ 2 11,250.00 **IgG** Conjugate > 6 x 4.8 mL 3 2,500.00 **Development Solution** бох > 1 x 6 bottles **IgG Curve Control** 2 60x 1,800.00 $> 6 \times 0.3 \text{ mL}$ 2 **IgM Curve Control** box. 5,000.00 $> 6 \times 0.3 \text{ mL}$ Anticardiolipin Antibody (ACA) IgG 10 pack 22,800.00 > 4 x 12 wells 10 Anticardiolipin Antibody (ACA) IgM pack 22,800.00 > 4 x 12 wells β2 - Glycoprotein 1 IgG 3 pack 22,800.00 > 4 x 12 wells 3 β2 - Glycoprotein 1 IgM pack 22,800.00 > 4 x 12 wells 5 pack ¹² Anti-nuclear Antibody Connective Tissue Disease 22,800.00 (ANA CTD) > 4 x 12 wells 13 Double Stranded Dinucleic Acid (DSDNA) 5 pack 22,800.00 > 4 x 12 wells 5 pack 14 IgM Calibrator Well 8,000.00 > 4 x 12 wells 5 pack 4,000.00 15 IgG Calibrator Well > 4 x 12 wells 16 IgM Calibrator 3 бох 10,000.00 > 1 curve 1 бох 2,500.00 **Stop Solution** > 1 x 6 bottles *NOTHING FOLLOWS* 997,000.00 Approved Budget for the Contract Total Amount of Quotation (in Words & in Figures) ______ I/We, the undersigned Supplier, hereby OFFER to supply/delivery/perform the above described items. Name of Company:

Name of Representative: Position/Designation:

Signature: