



REQUEST FOR QUOTATION

Date: 12 November 2021

Reference: RFQ CO-21-0029SVP

1. The **Philippine Institute of Traditional and Alternative Health Care (PITAHC)** through its **Bids and Awards Committee (BAC)** invites interested bidders to submit a proposal, with the total Approved Budget for the Contract (ABC) in the total amount of **Seventy-Seven Thousand Nine Hundred Twenty Pesos only (PhP77,920.00) inclusive of VAT** for the procurement of the item/s stated below:

PITAHC 2021 App Reference	PR Number	ITEM DESCRIPTION
5020301002	21-10-0133	COMMON-USE SUPPLIES AND EQUIPMENT Lot 1 –Office Supplies – PhP 13,655.00 Lot 2 – Office Equipment - PhP 64,265.00 <i>(See the of the breakdown in the Price Proposal Form)</i>

2. Procurement shall be conducted through Shopping under Section 52.1 (b) as prescribed under Rule XVI- Alternative Methods of Procurement of the 2016 Revised Implementing Rules and Regulations (IRR) of Republic Act (R.A.) No. 9184, otherwise known as the “*Government Procurement Reform Act*”.
3. The proposal must be duly signed by the bidder and must be submitted to the BAC Secretariat, PITAHC Building, Matapang St., East Avenue Medical Center Compound, Barangay Central, Quezon City or sent thru fax at (02) 8376-3067 or email at bacpitaHC@gmail.com. The proposal shall be received until **18 November 2021**.
4. PITAHC reserves the right to waive any formality in the responses to the eligibility requirements and to this invitation. PITAHC further reserves the right to reject all proposals, or declare a failure of small value procurement, or not award the contract, and makes no assurance that the contract shall be entered into as a result of this invitation without thereby incurring any liability to the affected bidder or bidders in accordance with R.A. No. 9184 and its 2016 Revised IRR.
5. For any clarification, you may contact **Rodelio D. Mendez Jr.** at telephone no. (02) 8282-5193 local 542.

(Sgd.)
DR. FRANCIS VICENTE S. RAS
Chairperson, PITAHC BAC



TERMS AND CONDITIONS

1. Bidders shall provide the **correct and accurate information** required in this form.
2. Delivery Schedule: **Fifteen (15) calendar days** upon receipt of Purchase Order (PO).
3. Delivery Site: **PITAHC CENTRAL OFFICE, East Avenue Medical Center Compound, Matapang St., Brgy. Central, Quezon City**
4. Payment Term: within **Thirty (30) calendar days** from the date of final inspection and acceptance of complete items.
5. Price proposal must be valid for a period of **fifteen (15) calendar days** from the date of submission.
6. Price proposal to be denominated in **Philippine Peso**, include all taxes and duties and/or levies payable.
7. Proposals exceeding the ABC shall be automatically rejected.
8. The **award of contract** shall be made to the lowest calculated and responsive proposal which complied with the minimum technical specifications and other terms and conditions stated herein.
9. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by the bidder or any of his/her duly authorized representative/s.
10. Liquidated damages equivalent to one tenth of one percent (0.001%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. PITAHC shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open.
11. The bidder must **submit a copy** of the following documents, **together with the proposals**, to ensure that the said bidder is technically, legally and financially capable to undertake the proposed project:
 - Valid and current Mayor's/Business Permit
 - Business/Income Tax Return for CY 2019/2020
 - Notarized Omnibus Sworn Statement by the prospective bidder in the new prescribed form as per GPPB Resolution No. 16-2020
 - PHILGEPS Registration Number (*to be indicated in the Price Proposal Form*)



PRICE PROPOSAL FORM

Date: _____

The Bids and Awards Committee

PITAHC Building, Matapang Street, East Avenue Medical Center Compound,
Barangay Central Quezon City

Sir/Madam:

After having carefully read and accepted the Terms and Conditions, I/we submit our proposal for the item as follows:

Lot No.	Item No.	Item Description	Unit Price (in PhP)	Total Price (VAT inclusive) (in PhP)*	Compliance to Technical Specification	
					YES	NO
1	Office Supplies					
	1	12 Pairs of SCISSORS, symmetrical, blade length, 65mm min				
	2	3 Pack of FOLDER, TAGBOARD, for Legal size documents, at least 100pcs/pack				
	3	10 Jars of GLUE, all-purpose gross weight: 200 grams min				
	4	8 Pieces of RULER, plastic, 450mm (18"), width: 38mm				
	5	12 Rolls of TAPE, PACKAGING, width: 48mm (A ± 1mm)				
	6	12 Rolls of TAPE, TRANSPARENT, width: 48mm (A ± 1mm)				
	7	30 Pieces of BALLPOINT PEN, BLACK INK				
	8	30 Pieces of BALLPOINT PEN, BLUE INK				
	9	60 Pieces of DATA FOLDER Material: Chipboard or similar quality Outer Cover: Leatherette paper or Polypropylene With lever arch file mechanism and taglia lock Spine with finger ring and clear plastic pocket for label insert Color: Black or Blue or Dark Green or similar dark shade Dimension: min 75mm W, 230mm H, 380mm L, (approximately 3"x9"x15")				
2	1	14 units of EXTERNAL HARD DRIVE, ITB 2.5" HDD, USB 3.0, WITH WARRANTY OF 1 Year min.				
	2	3 units of DIGITAL VOICE RECORDER, built-in memory: 4GB (expandable); with earphone jack, built-in microphone, USB connectivity, optimum recording and playback capability; 20 hours battery life minimum; with complete accessories required for use and user's manual; with warranty 1 year minimum				

Amount in Words: Lot No. 1 _____
 Lot No. 2 – Item No. 1 _____
 Lot No. 2 – Item No. 2 _____

The above-quoted price is inclusive of **all costs** and applicable taxes.

Very truly yours,

Signature : _____
 Printed Name : _____
 Date : _____
 Company Name : _____
 Contact Number : _____
 PHILGEPS Registration Number: _____

**Do not fill out* | _____