



REQUEST FOR PROPOSAL

Date: 28 February 2022

Reference: **RFP CO-22-002SVP**

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 **Fifty-Eight Thousand Five Hundred Pesos Only (PhP58,500.00) inclusive of VAT** for the procurement of the item/s stated below:

PITAHC 2022 APP Ref	PR Number	Item Description
5040100000	22-02-0027	SUPPLY AND DELIVERY OF HerbMAP PACKAGE LABEL STICKERS

2. Procurement shall be conducted through Small Value Procurement under Section 53.9 - Negotiated Procurement 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 **04 March 2022**.
4. 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:
 - a. Valid and current Mayor’s/Business Permit 2022
 - b. Business/Income Tax Return for CY 2019/2020
 - c. Notarized Omnibus Sworn Statement by the prospective bidder in the new prescribed form as per GPPB Resolution No. 16-2020
 - d. PHILGEPS Registration Number (*to be indicated in the Price Proposal Form*)
5. 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 Implementing Rules and Regulations.
6. For any clarification, you may contact Mr. **Rodelio Mendez, Jr.** at telephone no. (02) 8376-3067

(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: **Within Sixty (60) calendar days** upon receipt of the final approved layout from PITAHC.
3. Delivery Site: **PITAHC CENTRAL OFFICE, East Avenue Medical Center Compound, Matapang St., Brgy. Central, Quezon City** or third party logistics within Metro Manila
4. Payment Term: within **Thirty (30) calendar days** full payment from the date of final inspection and acceptance of all delivered items.
5. Price proposal must be valid for a period of **thirty (30) 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.



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:

Item Description	Qty	UOM	Total Price (in PhP)	Total Price (VAT inclusive) (in PhP)	Compliance to Technical Specification	
					Yes	No
SUPPLY AND DELIVERY OF HerbMAP PACKAGE LABEL STICKERS <i>Technical Specifications</i> Size: 4 in x 6.5 in Supplier shall provide samples for final pressproofing and inspection With Die cut Special High Gloss Sticker Full color with Layouting and Pressproofing Design: In accordance with the attached Logo Sticker of HerbMAP <i>– See Annex A</i>	19,500	pieces				
<i>Terms and Conditions</i>						

Amount in Words: _____

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: _____



Annex “A”

Logo Sticker of HerbMAP
Size: 4 in x 6. in

