



Republic of the Philippines
Province of Pampanga
Bids and Awards Committee
Provincial Capitol, City of San Fernando, (P) / (045) 435-5122

P.R. No./Date/End User: 22-3388(HI)/9-16-22/DPMMH
Purpose: For Hospital use.

RFO No. 220686
SEP 27 2022

REQUEST FOR QUOTATION

Company Name: _____
Address: _____
Tel. No. : _____

Please quote your lowest price for the requirements listed hereunder subject to the Terms and Conditions stated below and submit to this Office duly signed by you or your representative not later than 4:00 p.m. OCT 03 2022 :

APPROVED BUDGET FOR
THE CONTRACT (ABC):
PhP 686,500.00

FRANCIS V. MASLOG
Vice Chairperson *Plus*
Bids and Awards Committee

TERMS AND CONDITIONS:

- All quotations may be typewritten or handwritten, placed in a sealed envelope.
- All quotations shall be valid for one hundred twenty (120) calendar days from the submission of the same.
- Any erasures or overwriting shall be valid only if they are signed or initialed by the supplier or its authorized representative.
- Interested suppliers are required to submit their valid current Mayor's Permit, PhilGEPS Registration Number, and Income/BIR Tax Return (for ABCs above P500,000.00) upon submission of quotation. In lieu of the Mayor's Permit and PhilGEPS Registration Number, the PhilGEPS Certificate of Platinum Membership may be submitted. For new businesses, submit the BIR Certificate of Registration in lieu of the ITR.
- The applicable rate for late deliveries is one tenth (1/10) of one percent (1%) of the cost of the unperformed portion for everyday of delay.
- The Provincial Government of Pampanga reserves the right to accept or reject any quotation, and to annul the procurement process and reject all quotations at any time prior to contract award, without thereby incurring any liability to the affected supplier/s.
- The PGP also reserves the right to waive any required formality in the proposals received, and select the proposal which it determine to be the most advantageous to the government.

Item No.	Quantity	Unit	Item Description	Unit Price	Total Price
1	50	pcs	Hospital bed mattress(Pre-cut solid foam, blue at least 4 inches thick, 36 inches width x 75 inches length, heavy duty with soft leatherette cover and zipper. With 4 plastic round vents (2 pcs/slide		
2	30	set	Desk/Wall type aneroid sphygmomanometer, Adult (Heavy duty)		
3	50	units	Hospital Bedside Table -Formica top, tubular type with guard rail, provided with one drawer and one lower metal shelf, mounted on rubber floor tip. Color: White -Dimensions: at least 16" length x 20" width x 32" height		
4	5	pc	Baby bassinet with acrylic bassinet and mattress at least 2 inches thickness and with caster wheel -Dimensions: at least 28" length x 15" ³ / ₄ width x 31" height		
Terms of Reference:					
The following documents must be attached or accomplished together with the quotation:					
1. Brand/Type of the item/s being offered must be indicated in the quotation.					
The procuring entity reserves the right to conduct product testing/ inspection if necessary to determine the fitness of the items being offered by prospective suppliers.					

Continue next page....Page 1 of 2

Plus

Item No.	Quantity	Unit	Item Description	Unit Price	Total Price
			After Sales Service:		
			Replacement of defective items within 24 hours upon notification by the end-user.		
			Schedule of Requirements:		
			Delivery within ten (10) days upon receipt of NOA/PO		
			x-x-x-x-x-x-x-x-x-x Page 2 of 2		
			Total Lot Price		
Note.: The winning supplier shall submit a duly signed and notarized Omnibus Sworn Statement prior to notice of award.					

THE BIDS AWARDS COMMITTEE:

Having carefully read and accepted your Terms and Conditions, including the technical specifications, I/We offer to supply/deliver the item/s as noted above.

 Supplier's authorized representative signature over printed name
 Designation: _____
 Contact No.: _____
 Email Address: _____

 BAC Canvasser

* JCL