



Republic of the Philippines
Province of Pampanga

Bids and Awards Committee
Provincial Capitol, City of San Fernando, (P) / (045) 435-5901

JUN 20 2024

RFQ No. 240589

P.R. No. / Date / End User / Purpose:
(24-3362 (H10) 6/6/2024 SAN LUIS DISTRICT HOSPITAL PARTS AND LABOR FOR THE REPAIR OF
MEDICAL EQUIPMENT (DENTAL CHAIR))

REQUEST FOR QUOTATION
Small Value Procurement

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. JUN 25 2024

APPROVED BUDGET FOR
THE CONTRACT (ABC):
PhP 75,000.00

ATTY. CECIL L. ANDIN
CHAIRPERSON
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 deadline of 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 and latest quarterly return or percentage tax..
- The applicable rate for late deliveries is one tenth (1/10) of one percent (1%) of the cost of the unperformed portion for every day 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.

Qty	Unit	Item Description	Unit Price	Total Price
1	lot	<p>Parts and Labor for the Repair of Dental Chair</p> <p>Replacement of Internal Tubings Replacement of Water Regulator Replacement of Air Regulator Replacement of Air Syringe Replacement of Water Syringe Replacement of Low Speed hand piece Replacement of High Speed hand piece Replacement of Water Retractor Replacement of Hand piece hose Replacement of Suction hose Replacement of Saliva ejector hose Replacement of Film viewer lamp Replacement of Drainage hose Replacement of Water bottle with cap Replacement of Dental lamp head assembly Replacement of Pneumatic foot switch Quick release pneumatic fittings</p> <p>SCOPE OF WORK:</p> <ol style="list-style-type: none"> 1. Inspection, Preventive Maintenance & Calibration. 2. Verification of output using test equipment. 3. Inspection of electrical and electronics components. 4. Functional testing. 5. Final testing and commissioning. <p>Must submit the following together with the quotation:</p> <ol style="list-style-type: none"> 1. Either a Training Certificate from a duly registered Biomedical Industry as Biomedical Equipment Technician. <p>TERMS OF REFERENCE:</p> <ol style="list-style-type: none"> 1. The procuring entity reserves the right to conduct product testing/inspection if necessary to determine the fitness of the item/s being offered by prospective supplier/s. 2. Issuance of Calibration Certification. <p>AFTER SALES SERVICE:</p> <ol style="list-style-type: none"> 1. At least one (1) year warranty on parts and service. 2. Defective items discovered within seven (7) days from date of delivery must be replaced within 24 hours upon notification by end-user. <p>SCHEDULE OF REQUIREMENTS:</p> <p>>Delivery within ten (100 days upon receipt of PO/NOA.</p>		

Total Lot Price

Note: The winning supplier shall submit a duly signed and notarized Omnibus Sworn Statement prior to notice of award.

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

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