



**BIDS AND AWARDS COMMITTEE**

Telephone No. 8531-9001 loc. 239

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E-mail: bac@ncmh.gov.ph

Website: www.ncmh.gov.ph

RFQ NO.: SVP2025-02-002

Date: February 18, 2025

**REQUEST FOR QUOTATION**

Company/Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Business/Mayor's Permit No.: \_\_\_\_\_

TIN: \_\_\_\_\_

PhilGEPS Registration Number: \_\_\_\_\_

The National Center for Mental Health (NCMH), through its Bids and Awards Committee (BAC), intends to procure the **Supply and Delivery of Dental Supplies CY 2025 (Line Item)** through **Section 53.9 (Negotiated Procurement – Small Value Procurement)** of the 2016 Revised Implementing Rules and Regulations under Republic Act No. 9184.

Please quote your lowest price on the items herewith attached, subject to the General Conditions, and stating the shortest time of delivery. Submit your sealed quotation using this form duly signed by your authorized representative together with the documentary requirements **not later than February 24, 2025, 4:00 PM**. Kindly transact / address directly at the BAC Secretariat Office. For inquiries, you may call 8531-9001 local 239 or 1823.

Respectfully yours,

  
**RUSSELLE SP. OLASO, MPA**  
Head, BAC Secretariat

**General Conditions:**

1. Bid offer must meet the minimum technical specifications.
2. Delivery period shall be within a maximum of *Seven (7) calendar days* upon receipt of approved Notice to Deliver (NTD).
3. *Price validity* and *payment terms* shall be for a minimum period of thirty (30) *calendar days*.
4. Documentary requirements **current** and **valid**:
  - a. **Mayor's / Business Permit** (Note: A recently expired Mayor's/Business permit together with the **Official Receipt** as proof that the prospective bidder has applied for renewal within the period prescribed by the concerned local government unit, shall be *accepted*. Section 24.1 of RA 9184 and its revised 2016 IRR.)

- b. **PhilGEPS Registration Number or PhilGEPS Certificate**
- c. **Annual Income Tax / Business Tax Return** (with corresponding eFPS Filing Reference Number and successful payment page or its equivalent proof of payment, if applicable)
- d. **Notarized Omnibus Sworn Statement**  
*(For Corporation – Attached Corporate Secretary Certificate)*  
*(For Sole Proprietorship – Attached Special Power of Attorney)*
- e. **Certified True Copy of Certificate of Product Registration from FDA for item no. 4, 5 and 7.**

**5. Failure to comply with the stated general conditions constitutes a disqualification.**

6. The NATIONAL CENTER FOR MENTAL HEALTH reserves the right to reject any or all bids, to waive any defect, and accept such bids advantageous to the government, and that it reserves the right to rescind the contract and debar the dealer from entering in future biddings of the center.

Notes:

- All documents must be **Certified True Copy (CTC)**. Bidder's certification is acceptable.
- On documents (licenses, certificates and/or registrations) for renewal, bidders are required to attach Official Receipt (OR) as proof of payment.
- Documentary requirements must be arranged in the above sequence/order & placed in a folder. **This form (RFQ) must be in a sealed envelope.** Both folder (documentary requirements) and envelope (price quotation) should be placed on an envelope of any color with proper label **as shown below.** Bidder may opt to use their own company letterhead using the format below.
- The sealed envelope must be submitted to the Procurement Section/BAC Office of the National Center for Mental Health (NCMH) on or before **February 24, 2025, or in case the deadline for each activity falls on a non-working day (i.e. Saturday and Sunday), legal holiday, or special non-working holiday, or other nonworking days duly declared by the President, Governor, Mayor or other Government Official authorized to make such declaration, the deadline shall be the next working day. (Sec. 38.2 of RA 9184 and its 2016 revised IRR)**
- **SAMPLE** must be provided within five (5) calendar days upon request of the End-User.

**MARKING / LABEL OF PRICE QUOTATION**

1. Sealed Price Quotation Envelope:

<b>Request for Quotation</b>	
<b>Supply and Delivery of Dental Supplies CY 2025 (Line Item)</b>	
<b>Item/s bid:</b>	
1.	_____
2.	_____
<b>Name of Company / Bidder:</b>	
<b>Tel. no.:</b>	
<b>Fax no.:</b>	

2. Documentary Requirements Folder:

<p><b>Request for Quotation</b>  <b>Supply and Delivery of Dental Supplies CY 2025 (Line Item)</b></p>	
<p>Item/s bid:</p>	
1.	_____
2.	_____
<p>Name of Company / Bidder:                  Tel. no.:                  Fax no.:</p>	

3. Mother Envelope:

<p><b>Request for Quotation</b>  <b>Supply and Delivery of Dental Supplies CY 2025 (Line Item)</b></p>	
<p>Name of Company / Bidder:                  Tel. no.:                  Fax no.:</p>	
<p><b>DO NOT OPEN ON OR BEFORE: (indicate closing date PhilGEPS)</b></p>	

After having carefully read and accepted the General Conditions, I/we submit our quotation/s for the item/s below:

**INSTRUCTION:**

1. Review each item in the list provided below.
2. **Check the "Yes" box** if you comply with the NCMH specification for that item. If you do not comply, **check the "No" box**.
3. In the "Offer/Remarks" section, **input the brand and any other specifications of your offered item**.
4. If the item is not applicable or not available, indicate "N/A" in the "Offer/Remarks" section.

Supply and Delivery of Dental Supplies CY 2025 (Line Item)				
Item No.	Item Description	Yes	No	REMARKS / OFFER/ BRAND
1	Ultrasonic scaler tips for Varios 970			
2	Ultrasonic scaler tips for dental chair-built scaler handpiece. (G1, G2, G3, G4, G5, P1, P3, P4)			
3	Articulating Paper			
	Shape	Straight and U-shaped		
	Color	Red and Blue		

	Quantity	12 pcs / pad, 6 pads / box			
4	<b>Anthraquinone Glycosides Salicylic Antibacterial/Anti-inflammatory Analgesic with Certificate of Product Registration from FDA</b>				
	Volume / Size	10 ml			
	CPR from FDA	Certified True Copy of CPR from FDA			
5	<b>Miconazole Oral Gel with Certificate of Product Registration from FDA</b>				
	Content	20 mg per gram antifungal			
	Weight / Size	3.5 g / tube			
	CPR from FDA	Certified True Copy of CPR from FDA			
6	<b>Flowable Composite</b>				
	Composition / Ingredients	Nanohybrid			
	Shade	A3 and A3.5			
	Viscosity	Heavy Flow			
	Material	Fiber Reinforced			
	Size	syringe 2x2gm			
7	<b>Mepivacaine Hydrochloride non -epinephrine with Certificate of Product Registration from FDA</b>				
	Qty	50 carp / box			
	CPR from FDA	Certified True Copy of CPR from FDA			
8	<b>Shofu Hybrid Polycarbonate</b>				
	Content	Powder 15g. / liquid 8g.			

**FINANCIAL OFFER:**

Please quote your **lowest/best offer** for the items below. Please do not leave blank items. Indicate "N/A" if the item is Not Applicable/Available.

SUMMARY OF APPROVED BUDGET			OFFERED QUOTATION		
Supply and Delivery of Dental Supplies CY 2025 (Line Item)	Qty / UOM	Approved Budget for the Contract	Supply and Delivery of Dental Supplies CY 2025 (Line Item)	Qty/ UOM	Total Offered Quotation
1	Ultrasonic scaler tips for Varios 970	27 pieces	Unit Price: ₱ 4,620.00 Total Price: ₱ 124,740.00		

2	Ultrasonic scaler tips for dental chair-built scaler handpiece. (G1, G2, G3, G4, G5, P1, P3, P4)	8 sets	Unit Price: ₱ 880.00 Total Price: ₱ 7,040.00			
3	Articulating Paper (Red & Blue) straight & u-shaped 80um 12pcs. /pad, 6pads /box	21 boxes	Unit Price: ₱ 950.00 Total Price: ₱ 19,950.00			
4	Anthraquinone Glycosides Salicylic Antibacterial/Anti-inflammatory Analgesic 10ml with CPR from FDA	28 bottles	Unit Price: ₱ 450.00 Total Price: ₱ 12,600.00			
5	Miconazole Oral Gel 20mg gram antifungal 3.5g/tube with CPR from FDA	42 tubes	Unit Price: ₱ 450.00 Total Price: ₱ 18,900.00			
6	Flowable Composite, Universal, Nanohybrid, restorative material (Shade A3 and Shade A3.5) heavy flow/ fiber reinforced, syringe 2x2gm (with at least 18-month expiry date upon delivery)	84 pieces	Unit Price: ₱ 4,440.00 Total Price: ₱ 372,960.00			
7	Mepivacaine Hydrochloride non - epinephrine 50 carp/box with CPR from FDA	42 boxes	Unit Price: ₱ 4,500.00 Total Price: ₱ 189,000.00			
8	Shofu Hybrid Polycarbonate powder 15g./liquid 8g.	21 sets	Unit Price: ₱ 600.00 Total Price: ₱ 12,600.00			
<b>TOTAL AMOUNT:</b>			<b>Seven Hundred Fifty-Seven Thousand Seven Hundred Ninety Pesos only</b> <b>(₱757,790.00)</b>	<b>TOTAL AMOUNT:</b>		

Brand and model: \_\_\_\_\_  
 Delivery period: \_\_\_\_\_ Max of 7 Calendar Days  
 Warranty: \_\_\_\_\_ Min of 3 months (supplies)  
 \_\_\_\_\_ Min of 1 year (equipment)  
 Price validity: \_\_\_\_\_ Min of 30 Calendar Days  
 Payment terms: \_\_\_\_\_ Min of 30 Calendar Days

SUBMITTED AND CONFORMED BY:

\_\_\_\_\_  
 PRINTED NAME AND SIGNATURE OF REPRESENTATIVE

\_\_\_\_\_  
 POSITION/DESIGNATION

\_\_\_\_\_  
 CONTACT NUMBER/S

\_\_\_\_\_  
 EMAIL ADDRESS