



National Center for Mental Health

NOTICE OF AWARD

December 18 2023

DESIGN EXCELLENCE HOME & OFFICE SYSTEM CO.

No. 1 Binmaka St. cor. Biak na Bato
Brgy. Manresa, Quezon City
Tel no.: (02) 8527-7651; 0992-737-5848
Email: designexcellence.co@gmail.com

Sir / Madam:

Please be advised that based on the results of the **Public Bidding** conducted by the National Center for Mental Health for the **SUPPLY AND DELIVERY OF VARIOUS OFFICE FURNITURE AND EQUIPMENT CY 2023**, the following item is hereby awarded to your company:

NO.	QTY	UNIT	ITEM/SPECIFICATIONS	UNIT PRICE	TOTAL PRICE
SUPPLY, DELIVERY AND INSTALLATION: Delivery Period: 60 calendar days upon receipt of Notice to Deliver (NTD) Warranty Period: 1 year from the date of delivery, inspection and acceptance					
1	1	unit	Modular File Compactor, 6 movable racks composed of 4 movable back-to-back and 2 single movable, with 4 shelves and 5 compartments, with lock and brake, OD: 2100mmH x 3700mmW x 620mmD OD: 2100mmH x 3700mmW x 450mmD, Catwalk Aisle: 800mm, Paint Finish: Powder Coated 1 bay Origin: Philippines	638,000.00	638,000.00
TOTAL AMOUNT					₱638,000.00

You are hereby required to submit the following **within ten (10) calendar days**:

- **Notarized Contract Agreement Form (Legal Size)** for the Public Bidding for the **SUPPLY AND DELIVERY OF VARIOUS OFFICE FURNITURE AND EQUIPMENT CY 2023**

NOTE: The signatory shall be **NOEL V. REYES, MD, FPPA, MMHoA, MEDICAL CENTER CHIEF II**; and

- Notarized Performance Securing Declaration; or
- Performance Security in any forms and amount stipulated below:

A. Cash or Cashier's / Manager's Check Bank Guarantee	Five Percent (5%) of the Total Contract Price
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"There is no Health without Mental Health"

B. Surety Bond callable upon demand issued by a surety or insurance company duly certified by Insurance Commission / GSIS	Thirty Percent (30%) of the Total Contract Price
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NOTE: Failure to provide any of the aforementioned requirements within ten (10) calendar days shall constitute sufficient grounds for cancellation of this Award and forfeiture of the Bid Security.

Truly yours,



NOEL V. REYES, MD, FPPA, MMHoA

Medical Center Chief II 



CONFORME:

Authorized Representative (Name & Signature)

Date and Time