



REPUBLIC OF THE PHILIPPINES
 Department of Health
NATIONAL CENTER FOR MENTAL HEALTH
 Nueve de Febrero Street, Mandaluyong City, Philippines
BIDS AND AWARDS COMMITTEE



Telephone No. 531-9001 loc. 242

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E-mail: bacncmh@yahoo.com

Website: www.ncmh.gov.ph

CHECKLIST FOR BIDDERS

Project: **Negotiated Procurement – Two Failed Bidding**
Supply and Delivery of Drugs and Medicines (Service Patient) CY2020

Approved Budget for the Contract (ABC): PhP 15,853,611.01

Date/Time and Venue of Opening of Bids: October 02, 2020, 09:00 AM
NCMH BAC Conference Room

Instructions:

1. A bidder must submit one (1) original (i.e., "ORIGINAL") and two (2) additional copies of the original (i.e., "COPY NO. 1" and "COPY NO. 2"). All documents shall be current and updated.
2. The "ORIGINAL" copy of the bid form shall be typed or written in ink and shall be signed by the bidder or its duly authorized representative.
3. To facilitate the evaluation of the bids, bidders are advised to compile the documents in two (2) separate folders (i.e., one for Eligibility/Technical Documents and another for Financial Documents), properly labelled and tabbed, and following the sequence provided herein.

CHECKLIST OF TECHNICAL AND FINANCIAL DOCUMENTS' ENVELOPE

I. TECHNICAL COMPONENT ENVELOPE

CLASS "A" DOCUMENTS

A. LEGAL DOCUMENTS

- (1) REGISTRATION CERTIFICATE FROM PHILIPPINE GOVERNMENT ELECTRONIC PROCUREMENT SYSTEM (PHILGEPS) – Platinum Membership; or
- (2) BUSINESS REGISTRATION CERTIFICATE from the Securities and Exchange Commission (SEC), Department of Trade and Industry (DTI) for sole proprietorship, or Cooperative Development Authority (CDA) for cooperatives, or any proof of such registration as stated in the BDS; and
- (3) MAYOR'S PERMIT (valid and current) issued by the city or municipality where the principal place of business of the prospective bidder is located; and
- (4) TAX CLEARANCE CERTIFICATE (valid and current) for Bidding Purposes, per Executive Order No. 398, s. 2005, as finally reviewed and approved by BIR.

B. TECHNICAL DOCUMENTS

- (1) Statement of ALL ITS ON-GOING GOVERNMENT AND PRIVATE CONTRACTS*, including contracts awarded but not yet started, if any, whether similar or not similar in nature and complexity to the contract to be bid, using the form prescribed in (Annex I);

This statement shall be supported with:

Notice of Award or Notice to Proceed or Contract issued by the owners.

**All spaces should be filled up with correct information.*

- (2) Statement of the Bidder's SINGLE LARGEST COMPLETED CONTRACT (SLCC)* similar to the contract to be bid, in accordance with ITB Clause 5.4 and using the form prescribed in (Annex II);

NOTE: Similar project refers to "Drugs and Medicines", costing at least twenty-five percent (25%) of the ABC.

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This statement shall be supported with:

(a) **Notice of Award** or **Contract** issued by the owners.

**All spaces should be filled up with correct information.*

(3) **BID SECURITY** in any of the following form:

- (3.1) **Notarized Bid Securing Declaration**, using the form prescribed in (Annex III); or
- (3.2) **Cash, Cashier's/Manager's Check**, issued by a Universal or Commercial Bank (not less than 2% of the ABC); or
- (3.3) **Bank Draft/Guarantee or an irrevocable Letter of Credit** issued by a Universal or Commercial Bank, or by a foreign bank but shall be accompanied by a confirmation from a Universal or Commercial Bank(not less than 2% of the ABC); or
- (3.4) **Surety Bond, callable upon demand** [issued by a surety or insurance company, with a certification from the Insurance Commission as authorized to issue such instrument](not less than 5% of the ABC).
- (4) **Duly signed Schedule of Requirements (Annex IV)**
- (5) **Conformity to TECHNICAL SPECIFICATIONS**, using the prescribed form (Annex V) of the Bidding Documents and showing compliance to each item description provided for by NCMH;
 - (5.1) **Current and Valid Certificate of Product Registration (CPR) from FDA**
 - (5.2) **Current and Valid License to Operate (LTO) from FDA**
 - (5.3) **Current and Valid Certificate of Distributorship (if applicable)**
 - (5.4) **Notarized LETTER OF ASSURANCE** as to the availability of stock and prompt delivery of goods.
 - (5.5) **Certificate of Performance**. For current supplier, it shall be issued by the Chief of Material Management Section (MMS) of NCMH for the current year. For non-current supplier, certificate issued from other hospitals or agencies are acceptable.
- (6) **Notarized OMNIBUS SWORN STATEMENT** in accordance with Section 25.3 of the IRR of RA 9184, using the form prescribed in (Annex VI)

CLASS "B" DOCUMENTS: IF APPLICABLE —

JOINT VENTURE AGREEMENT (JVA), in case the joint venture is already in existence; or

In the absence of a JVA, **Duly Notarized Statements** (i.e., Protocol/Undertaking of Agreement) from all the potential joint venture partners should be included in the bid, stating: *That*, they will enter into and abide by the provisions of the JVA in the event that the bid is successful; and *That*, failure to enter into a joint venture in the event of a contract award shall be ground for the forfeiture of the bid security (Section 23.1(b) of the 2016 Revised IRR).

NOTES:

- (a) The JVA or the Protocol must specify the company/partner and the name of the office designated as the authorized representative of the joint venture.
- (b) Each partner of the joint venture shall submit their respective Legal (I.A) — Eligibility Documents.
- (c) The submission of technical and financial eligibility documents by any of the joint venture partners constitutes compliance: *Provided that*, the partner responsible to submit the NFCC shall likewise submit the Statement of all of its ongoing contracts and latest Audited Financial Statements.

*****IF NOT APPLICABLE INDICATE IN A SEPARATE SHEET WITH TABBING THAT JOINT VENTURE AGREEMENT IS NOT APPLICABLE*****

OTHER DOCUMENTARY REQUIREMENTS UNDER RA NO. 9184 (as applicable)

- (7) [For foreign bidders claiming by reason of their country's extension of reciprocal rights to Filipinos] Certification from the relevant government office of their country stating that Filipinos are allowed to participate in government procurement activities for the same item or product.
- (8) Certification from the DTI if the bidder claims preference as a Domestic Bidder or domestic Entity

C. FINANCIAL DOCUMENTS

- (1) **AUDITED FINANCIAL STATEMENTS (For CY 2019 and 2018)** showing among others the total and current assets and liabilities stamped "received" by the BIR or its duly accredited and authorized institutions for the preceding calendar year which should not be earlier than two (2) years from date of bid submission. Attach a copy of the **corresponding INCOME TAX RETURNS for each AFS submitted (BIR 1701 or 1702 – RT or the equivalent)** filed and paid thru BIR's Electronic Filing and Payment System (eFPS).
- *** Include as attachment to the ITR the eFPS page containing the filing reference number and the page showing successful payment (if applicable)*****
- (2) Duly signed **NET FINANCIAL CONTRACTING CAPACITY (NFCC) COMPUTATION**, in accordance with ITB Clause 5.5, or a commitment from a Universal or Commercial Bank to extend a Credit Line in favor of the prospective bidder if awarded the contract to be bid.

FINANCIAL COMPONENT ENVELOPE

- (1) Duly signed and completed **FINANCIAL BID FORM. (Annex VII) And**
- (2) Duly signed and completed **PRICE SCHEDULE FORM. (Annex VIII)**

Note well:

1. Any missing, incomplete, or patently insufficient document in the above-mentioned checklist shall be considered "FAILED" (as per Rule IX, Sec. 30.1 of R.A. No. 9184).
2. In case of discrepancies between this checklist and the bidding documents the latter shall prevail.

The above checklist was discussed and agreed upon by the members of the NCMH Bids and Awards Committee in consultation with its Technical Working Group, including the proponent /end-user/ implementing unit.



**LIST OF ITEMS FOR NEGOTIATED PROCUREMENT (TWO FAILED BIDDING) CY2020
DRUGS AND MEDICINES (SERVICE PATIENT)**

NO.	ITEM CODE	ITEM DESCRIPTION	QTY.	UNIT OF MEASURE	UNIT PRICE	TOTAL PRICE
	CARBAPENEMS					
1	2FBDMSP2020-01	Ertapenem (as Sodium salt) 1 g / vial	1,000	vial	3,739.49	3,739,490.00
	MACROLIDES					
2	2FBDMSP2020-02	Clarithromycin 500mg OD	5,000	tablet	101.95	509,750.00
	QUINOLONES					
3	2FBDMSP2020-03	Ciprofloxacin 400mg / 200ml, IV infusion	2,000	vial	1,650.25	3,300,500.00
4	2FBDMSP2020-04	Levofloxacin 750mg	3,000	tablet	223.37	670,110.00
5	2FBDMSP2020-05	Ampicillin (as Sodium Salt) 500mg	1,500	vial	111.31	166,965.00
	TOPICAL ANTIBIOTIC					
6	2FBDMSP2020-06	Tobramycin + Dexamethasone Eye Ointment 0.3% + 0.1%, 3.5g tube	100	tube	469.08	46,908.00
7	2FBDMSP2020-07	Moxifloxacin HCl Eye Drops 5mg/ml, 0.5% w/v Sterile Ophthalmic Solution, 5ml bottle	180	tube	543.75	97,875.00
	URINARY ANTISEPTIC					
8	2FBDMSP2020-08	Nitrofurantoin 100 mg	2,000	capsule	67.93	135,860.00
	ANTACID					
9	2FBDMSP2020-09	Aluminum Hydroxide + Magnesium Hydroxide 225mg Aluminum Hydroxide + 200 mg Magnesium Hydroxide per 5 ml suspension 60 ml	200	bottle	63.55	12,710.00
	ANTI HYPERTENSIVE					
10	2FBDMSP2020-10	Captopril 25mg	5,000	tablet	6.77	33,850.00
11	2FBDMSP2020-11	Digoxin 250mcg	1,000	tablet	6.02	6,020.00
12	2FBDMSP2020-12	Dobutamine 2mg / ml, 250 ml D5W pre-mixed	200	ampule	975.26	195,052.00
	ANALGESIC / ANTI INFLAMMATORY					
13	2FBDMSP2020-13	Paracetamol 250mg / 5ml, 60 ml susp.	100	bottle	140.80	14,080.00
	ANALGESIC (OPIOID)					
14	2FBDMSP2020-14	Morphine (as sulfate) 10 mg / ml, 1 ml ampule	500	ampule	129.25	64,625.00
	CORTICOSTEROIDS					
15	2FBDMSP2020-15	Methylprednisolone 125mg/ml 2 ml + diluent vial	100	tablet	2,320.38	232,038.00
	DIURETIC					
16	2FBDMSP2020-16	Acetazolamide 250 mg	500	tablet	20.00	10,000.00
17	2FBDMSP2020-17	Furosemide 20 mg	2,000	tablet	9.81	19,620.00
	BRONCHODILATOR					
18	2FBDMSP2020-18	Ephedrine 50 mg / ml, 1 ml	150	ampule	112.18	16,827.00
19	2FBDMSP2020-19	Lidocaine (as Hydrochloride) 10%, 50 ml spray	120	bottle	2,400.00	288,000.00
20	2FBDMSP2020-20	Phenobarbital 120mg / ml, 1 ml	400	ampule	587.74	235,096.00
21	2FBDMSP2020-21	Verapamil 2.5mg/ml, 2 ml	100	ampule	425.05	42,505.00

DRUGS ACTING ON GENITO-URINARY SYSTEM						
22	2FBDMSP2020-22	Hypromellose Eye Drop Solution 5mg/ml, 10 ml	150	bottle	165.70	24,855.00
MIOTIC / MYDRIATICS DRUGS						
23	2FBDMSP2020-23	Prednisolone Eye Drops 1%, 5ml bottle	50	bottle	167.00	8,350.00
24	2FBDMSP2020-24	Tropicamide Eye Drops Solution 0.5%, 5 ml	100	bottle	545.25	54,525.00
ANTI DEPRESSANT						
25	2FBDMSP2020-25	Fluoxetine 20 mg	3,000	capsule	5.38	16,140.00
ANTI FUNGAL						
26	2FBDMSP2020-26	Permethrin Lotion 5%, 60 ml	20,000	bottle	271.58	5,431,600.00
AMINOGLYCOSIDES						
27	2FBDMSP2020-27	Amikacin 250mg / ml, 2ml vial	2,001	vial	240.01	480,260.01
TOTAL					PHP	15,853,611.01

Submitted by:

Signed

BELMA ESGUERRA CRUZ, RPh

End-user, BAC for Drugs and Medicines- Service Patient CY 2020

Recommending Approval:

Signed

VICTOR GERARDO E. PUNDAVELA, MD, FPOA, FPCS, MMHoA

Vice-Chairperson BAC for Drugs and Medicines- Service Patient CY 2020

Approved by:

Signed

NOEL V. REYES, MD, FPPA

OIC, Medical Center Chief II

BID SECURING DECLARATION

ANNEX III: *SAMPLE FORMS*

REPUBLIC OF THE PHILIPPINES)
CITY OF _____) S.S.

x-----x

BID SECURING DECLARATION Invitation to Bid:[*Insert Reference number*]

To: [*Insert name and address of the Procuring Entity*]

I/We, the undersigned, declare that:

1. I/We understand that, according to your conditions, bids must be supported by a Bid Security, which may be in the form of a Bid-Securing Declaration.
2. I/We accept that: (a) I/we will be automatically disqualified from bidding for any contract with any procuring entity for a period of two (2) years upon receipt of your Blacklisting order; and, (b) I/we will pay the applicable fine provided under Section 6 of the Guidelines on the Use of Bid Securing Declaration, within fifteen (15) days from receipt of the written demand by the procuring entity for the commission of acts resulting to the enforcement of the bid securing declaration under Sections 23.1(b), 34.2, 40.1 and 69.1, except 69.1(f), of the IRR of RA 9184; without prejudice to other legal action the government may undertake.
3. I/We understand that this Bid Securing Declaration shall cease to be valid on the following circumstances:
 - (a) Upon expiration of the bid validity period, or any extension thereof pursuant to your request;
 - (b) I am/we are declared ineligible or post-disqualified upon receipt of your notice to such effect, and (i) I/we failed to timely file a request for reconsideration or (ii) I/we filed a waiver to avail of said right;
 - (c) I am/we are declared the bidder with the Lowest Calculated Responsive Bid, and I/we have furnished the performance security and signed the Contract.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand/s this ____ day of [*month*] [*year*] at [*place of execution*].

[*Insert NAME OF BIDDER'S AUTHORIZED
REPRESENTATIVE*]
[*Insert Signatory's Legal Capacity*]
Affiant

SUBSCRIBED AND SWORN to before me this ____ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. _____ and his/her Community Tax Certificate No. _____ issued on ____ at _____.

Witness my hand and seal this ____ day of [month] [year].

NAME OF NOTARY PUBLIC

Serial No. of Commission _____

Notary Public for _____ until _____

Roll of Attorneys No. _____

PTR No. _____ [date issued], [place issued]

IBP No. _____ [date issued], [place issued]

Doc. No. _____

Page No. _____

Book No. _____

Series of _____



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Annex IV

Schedule of Requirements

ITEM NO.	DESCRIPTION	QTY	DELIVERY SITE			DELIVERY PERIOD and TERMS OF PAYMENT
			OFFICE	FACILITY	ADDRESS	
	Supply and Delivery of Drugs and Medicines (Service Patient)					
2FBDMSP 2020-01	Ertapenem (as Sodium Salt) 1 g / vial	1,000 vial	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-02	Clarithromycin 500mg OD	5,000 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-03	Ciprofloxacin 400mg / 200ml, IV Infusion	2,000 vial	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-04	Levofloxacin 750mg	3,000 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-05	Ampicillin (as Sodium Salt) 500mg	1,500 vial	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-06	Tobramycin + Dexamethasone Eye Ointment 0.3% + 0.1%, 3.5g tube	100 tube	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-07	Moxifloxacin HCl Eye Drops 5mg/ml, 0.5% w/v Sterile Ophthalmic Solution, 5ml bottle	180 tube	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver

ITEM NO.	DESCRIPTION	QTY	DELIVERY SITE			DELIVERY PERIOD and
2FBDMSP 2020-08	Nitrofurantoin 100mg	2,000 capsule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-09	Aluminum Hydroxide + Magnesium Hydroxide 225mg Aluminum Hydroxide + 200mg Magnesium Hydroxide per 5 ml Suspension, 60ml	200 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-10	Captopril 25mg	5,000 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-11	Digoxin 250mcg	1,000 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-12	Dobutamine 2mg / ml, 250ml D5W Pre-mixed	200 ampule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-13	Paracetamol 250mg / 5ml, 60 ml Susp.	100 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-14	Morphine (as Sulfate) 10mg / ml, 1 ml ampule	500 ampule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-15	Methylprednisolone 125mg/ml 2ml + diluent vial	100 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-16	Acetazolamide 250mg	500 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-17	Furosemide 20mg	2,000 tablet	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-18	Ephedrine 50mg / ml, 1 ml	150 ampule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver

ITEM NO.	DESCRIPTION	QTY	DELIVERY SITE			DELIVERY PERIOD and
2FBDMSP 2020-19	Lidocaine (as Hydrochloride) 10%, 50 ml Spray	120 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-20	Phenobarbital 120mg / ml, 1ml	400 ampule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-21	Verapamil 2.5mg/ml, 2ml	100 ampule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-22	Hypromellose Eye Drop Solution 5mg/ml, 10ml	150 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-23	Prednisolone Eye Drops 1%, 5ml bottle	50 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-24	Tropicamide Eye Drops Solution 0.5%, 5ml	100 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-25	Fluoxetine 20mg	3,000 capsule	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-26	Permethrin Lotion 5%, 60ml	20,000 bottle	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
2FBDMSP 2020-27	Amikacin 250mg/ml, 2ml Vial	2,001 vial	MMS	NCMH	9 De Febrero Mandaluyong City	7 Days upon the receipt of Notice to Deliver
CONFORME:						
<i>(Company Name)</i>						
<i>(Name and Signature of Authorized Representative)</i>						



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Department of Health

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ANNEX V TECHNICAL SPECIFICATIONS

DRUGS AND MEDICINES (SERVICE PATIENT) CY2020

INSTRUCTION: Bidders must state here either "Comply" or "Not Comply" against each of the individual parameters of each Specification stating the corresponding performance parameter of the equipment offered. Statements of "Comply" or "Not Comply" must be supported by evidence in a Bidders Bid and cross-referenced to that evidence. Evidence shall be in the form of manufacturer's un-amended sales literature, unconditional statements of specification and compliance issued by the manufacturer, samples, independent test data etc., as appropriate. A statement that is not supported by evidence or is subsequently found to be contradicted by the evidence presented will render the Bid under evaluation liable for rejection. A statement either in the Bidders statement of compliance or the supporting evidence that is found to be false either during Bid evaluation, post-qualification or the execution of the Contract may be regarded as fraudulent and render the Bidder or supplier liable for prosecution subject to the provisions of ITB Clause 3.1(a) (ii) and/or GCC Clause 2.1(a)(ii).

Technical Specifications Particulars	Requirements	Statement of Compliance
1. Ertapenem	(as Sodium Salt) 1 g / vial	
2. Clarithromycin	500 mg OD	
3. Ciprofloxacin	400mg / 200ml, IV Infusion	
4. Levofloxacin	750 mg	
5. Ampicillin	(as Sodium Salt) 500mg	
6. Tobramycin + Dexamethasone Eye Ointment	0.3% + 0.1%, 3.5g tube	
7. Moxifloxacin HCl Eye Drops	5mg/ml, 0.5% w/v Sterile Ophthalmic Solution, 5ml bottle	
8. Nitrofurantoin	100 mg	
9. Aluminum Hydroxide + Magnesium Hydroxide 225mg Aluminum Hydroxide + 200mg Magnesium Hydroxide	5 ml Suspension, 60ml	

NCMH-2020: Negotiated Procurement (Two-Failed Bidding) for Drugs and Medicines (Service Patient) CY 2020

Annex V: Technical Specifications

Page 1

CONFORME:
(Company Name)
(Name and Signature of Authorized Representative)

10. Captopril	25 mg	
11. Digoxin	250mcg	
12. Dobutamine	2mg / ml, 250ml D5W Pre-mixed	
13. Paracetamol	250mg / 5ml, 60 ml Susp.	
14. Morphine	(as Sulfate) 10mg / ml, 1 ml ampule	
15. Methylprednisolone	125mg/ml 2ml + diluent vial	
16. Acetazolamide	250mg	
17. Furosemide	20mg	
18. Ephedrine	50mg / ml, 1 ml	
19. Lidocaine	(as Hydrochloride) 10%, 50 ml Spray	
20. Phenobarbital	120mg/ml, 1ml	
21. Verapamil	2.5mg/ml, 2ml	
22. Hypromellose	Eye Drop Solution 5mg/ml, 10ml	
23. Prednisolone	Eye Drops 1%, 5ml bottle	
24. Tropicamide	Eye Drops Solution 0.5%, 5ml	
25. Fluoxetine	20 mg	
26. Permethrin Lotion	5%, 60ml	
27. Amikacin	250mg/ml, 2ml Vial	
CONFORME:		
<i>(Company Name)</i>		
<i>(Name and Signature of Authorized Representative)</i>		

CONFORME:
<i>(Company Name)</i>
<i>(Name and Signature of Authorized Representative)</i>

OMNIBUS SWORN STATEMENT

ANNEX VI: SAMPLE FORMS

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

AFFIDAVIT

I, *[Name of Affiant]*, of legal age, *[Civil Status]*, *[Nationality]*, and residing at *[Address of Affiant]*, after having been duly sworn in accordance with law, do hereby depose and state that:

1. **Select one, delete the other:**

If a sole proprietorship: I am the sole proprietor or authorized representative of *[Name of Bidder]* with office address at *[address of Bidder]*;

If a partnership, corporation, cooperative, or joint venture: I am the duly authorized and designated representative of *[Name of Bidder]* with office address at *[address of Bidder]*;

2. **Select one, delete the other:**

If a sole proprietorship: As the owner and sole proprietor, or authorized representative of *[Name of Bidder]*, I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]*, as shown in the attached duly notarized Special Power of Attorney;

If a partnership, corporation, cooperative, or joint venture: I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]*, as shown in the attached *[state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable;)]*;

3. *[Name of Bidder]* is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;
4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;
5. *[Name of Bidder]* is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

6. **Select one, delete the rest:**

If a sole proprietorship: The owner or sole proprietor is not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

If a partnership or cooperative: None of the officers and members of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

If a corporation or joint venture: None of the officers, directors, and controlling stockholders of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. *[Name of Bidder]* complies with existing labor laws and standards; and
8. *[Name of Bidder]* is aware of and has undertaken the following responsibilities as a Bidder:
- a) Carefully examine all of the Bidding Documents;
 - b) Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
 - c) Made an estimate of the facilities available and needed for the contract to be bid, if any; and
 - d) Inquire or secure Supplemental/Bid Bulletin(s) issued for the *[Name of the Project]*.
9. *[Name of Bidder]* did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
10. The Supplier / Contractor (Name of Supplier / Contractor) did not lend its license/s or subcontract to anyone their principal obligation.

IN WITNESS WHEREOF, I have hereunto set my hand this ___ day of ___, 20__ at _____, Philippines.

Bidder's Representative/Authorized Signatory

SUBSCRIBED AND SWORN to before me this ___ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. _____ and his/her Community Tax Certificate No. _____ issued on ___ at _____.

Witness my hand and seal this ___ day of [month] [year].

NAME OF NOTARY PUBLIC

Serial No. of Commission _____

Notary Public for _____ until _____

Roll of Attorneys No. _____

PTR No. _____ [date issued], [place issued]

IBP No. _____ [date issued], [place issued]

Doc. No. _____

Page No. _____

Book No. _____

Series of _____

* This form will not apply for WB funded projects.

BID FORM

ANNEX VII: SAMPLE FORMS

Date: _____
Invitation to Negotiate No.: _____

To: *[name and address of Procuring Entity]*

Gentlemen and/or Ladies:

Having examined the Bidding Documents including Bid Bulletin Numbers *[insert numbers]*, the receipt of which is hereby duly acknowledged, we, the undersigned, offer to *[supply/deliver/perform]* *[description of the Goods]* in conformity with the said Bidding Documents for the sum of *[total Bid amount in words and figures]* or such other sums as may be ascertained in accordance with the Schedule of Prices attached herewith and made part of this Bid.

We undertake, if our Bid is accepted, to deliver the goods in accordance with the delivery schedule specified in the Schedule of Requirements.

If our Bid is accepted, we undertake to provide a performance security in the form, amounts, and within the times specified in the Bidding Documents.

We agree to abide by this Bid for the Bid Validity Period specified in **BDS** provision for **ITB** Clause 18.2 and it shall remain binding upon us and may be accepted at any time before the expiration of that period.

Commissions or gratuities, if any, paid or to be paid by us to agents relating to this Bid, and to contract execution if we are awarded the contract, are listed below:

Name and address of agent	Amount and Currency	Purpose of Commission or gratuity
_____	_____	_____
_____	_____	_____
_____	_____	_____

(if none, state "None")

Until a formal Contract is prepared and executed, this Bid, together with your written acceptance thereof and your Notice of Award, shall be binding upon us.

We understand that you are not bound to accept the Lowest Calculated Bid or any Bid you may receive.

We certify/confirm that we comply with the eligibility requirements as per ITB Clause 5 of the Bidding Documents.

We likewise certify/confirm that the undersigned, *[for sole proprietorships, insert: as the owner and sole proprietor or authorized representative of Name of Bidder, has the full power and authority to participate, submit the bid, and to sign and execute the ensuing contract, on*

the latter's behalf for the Name of Project of the Name of the Procuring Entity [for partnerships, corporations, cooperatives, or joint ventures, insert: is granted full power and authority by the Name of Bidder, to participate, submit the bid, and to sign and execute the ensuing contract on the latter's behalf for Name of Project of the Name of the Procuring Entity].

We acknowledge that failure to sign each and every page of this Bid Form, including the attached Schedule of Prices, shall be a ground for the rejection of our bid.

Dated this _____ day of _____ 20_____.

[signature]

[in the capacity of]

Duly authorized to sign Bid for and on behalf of _____

