



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



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Website: www.ncmh.gov.ph

SECTION III: BID DATA SHEET

ITB Clause	
5.3	For this purpose, contracts similar to the Project shall be: a. Supply, Delivery, Installation, Commissioning and Testing of Physical Therapy Equipment CY 2023 b. Completed within two (2) years prior to the deadline for the submission and receipt of bids.
7.1	Subcontracts is not allowed
12	The Price of the Goods shall be quoted in Philippine Peso .
14.1	The bid security shall be in the form of a Bid Securing Declaration, or any of the following forms and amounts: a. The amount is not less than two percent (2%) of ABC, if bid security is in cash, cashier's/manager's check, bank draft/guarantee or irrevocable letter of credit; or b. The amount is not less than five percent (5%) of ABC, if bid security in is Surety Bond.
19.3	Supply, Delivery, Installation, Commissioning and Testing of Physical Therapy Equipment CY 2023 <i>Please see List of Items for complete lists, quantity and ABC</i>
20.2	Within a non-extendible period of five (5) calendar days from receipt by the Bidder of the notice from the BAC that is submitted the Lowest Calculated Bid, the Bidder shall submit its a. Current and Valid Tax Clearance b. Latest Annual Income Tax Return (with corresponding eFPS Filing Reference Number and successful payment page or its equivalent proof of payment, if applicable) c. Certificate of Philgeps Registration (Platinum Membership) d. Current and Valid Mayor's Permit
21.2	Additional contract documents relevant to the Project that is required by the Procuring Entity: a. Notice of Award or Notice to Proceed or Contract issued by the owners, as attachment for the Statement of the prospective bidder of All its On Going Government and Private Contracts b. Notice of Award or Contract issued by the owners, as attachment for the Single Largest Completed Contract (SLCC) c. Current and Valid Certificate of Authorized or Exclusive Distributorship d. Notarized Letter of Assurance from the Bidder on the Availability of Stocks

	<ul style="list-style-type: none"> e. Certificate of Good Performance [For current service provider, it shall be issued by the Head of Procuring Entity / Medical Center Chief II of NCMH, for the current year. For non-current service provider, certificate issued from other Hospitals or agencies are acceptable (at least SATISFACTORY RATING)]. f. Certification that the unit being offered shall be brand new. g. Certification of exclusive or authorized distribution from the manufacturer. h. Certification that the supplier/ bidder shall provide applications training for user and maintenance personnel of the hospital. i. Certification that the supplier/ bidder shall be responsible for the transportation to site, delivery, installation and testing on the site, and expenses for such will be on the account of the supplier/ bidder. j. Certification that the supplier/ bidder has the capability for the corrective and preventive maintenance of the unit, to include service engineers and technicians. k. Certification to provide user's manual in English language - (operations manual 2 copies and Service manual 2 copies). l. Bidder's certification that parts shall be available at the authorized service center/s for a period of 3 yrs after the warranty period. m. Certification that the supplier shall provide free installation of the equipment. n. Warranty certificate 1 year of parts and two years for service from date of delivery, inspection and acceptance. o. Certification that the brand has been in the local market for at least two years with at least one (1) installation of the equipment in the local market. p. Current and valid certificate of manufacturer's compliance with ISO and/ or CE Certificate or its equivalent.
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The Eligibility Documents and Technical Proposal combined in one folder and the Financial Proposal in separate Folder (**GREEN FOLDER**). Each folder with **fastener/shoelace on top, with Table of Contents and Tabs (properly labeled according to the checklist for bidders issued)**.

MARKING FOR ELIGIBILITY/TECHNICAL PROPOSALS / FINANCIAL PROPOSALS

"Original Copy"									
NATIONAL CENTER FOR MENTAL HEALTH Nueve De Febrero St., Mandaluyong City									
PUBLIC BIDDING FOR <u>(CATEGORY)</u> CY 2023									
ELIGIBILITY DOCUMENTS <u>TECHNICAL PROPOSAL</u> / <u>FINANCIAL PROPOSAL</u>									
DELA CRUZ COMPANY 143 Pag-ibig St., Quezon City Tel: / Fax:									

Indicate here "Original Copy of Eligibility Documents & Technical Proposal, and Financial Proposal"

PROCURING ENTITY'S NAME & ADDRESS

PUBLIC BIDDING CATEGORY & CALENDAR YEAR

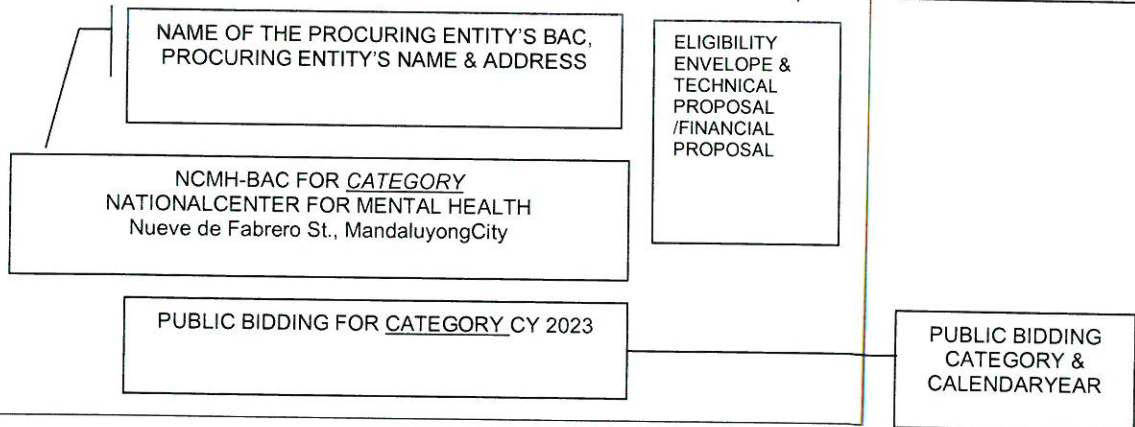
BID PROPOSAL NAME

NAME, ADDRESS, & CONTACT NOS. (TELEPHONE & FACSIMILE) OF THE BIDDERS

NOTE: Color of Folder is **GREEN**
Color of Envelope is **GREEN**

Note: All tabbing shall be in words / title based on the Checklist.

The Eligibility Documents & Technical Proposals shall be placed in one envelope and the Financial Proposal also placed in another envelope (**GREEN**). All envelopes shall have the following markings:



MARKINGS FOR ENVELOPES

DELA CRUZ COMPANY
143 Pag-Ibig St., Quezon City
Tel: _____ / Fax: _____
DO NOT OPEN BEFORE: _____ / ____ :

NAME, ADDRESS & CONTACT NUMBERS (Telephone & Facsimile) OF THE BIDDER, "DO NOT OPEN" LABEL WITH THE DATE & TIME OF THE SUBMISSION & OPENING OF BIDS