



BIDS AND AWARDS COMMITTEE

Telephone No. 8531-9001 loc. 239

Telefax No. 8531-8318

E-mail: bac@ncmh.gov.ph

Website: www.ncmh.gov.ph

RFQ NO.: SVP2025-02-004

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 Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)** 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 Proceed (NTP).
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)

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:

Request for Quotation	
Supply and Delivery of Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)	
Item/s bid:	
1.	_____
2.	_____
Name of Company / Bidder:	
Tel. no.:	
Fax no.:	

2. Documentary Requirements Folder:

<p>Request for Quotation Supply and Delivery of Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)</p>	
<p>Item/s bid:</p>	
1.	_____
2.	_____
<p>Name of Company / Bidder: Tel. no.: Fax no.:</p>	

3. Mother Envelope:

<p>Request for Quotation Supply and Delivery of Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)</p>	
<p>Name of Company / Bidder: Tel. no.: Fax no.:</p>	
<p>DO NOT OPEN ON OR BEFORE: (indicate closing date PhilGEPS)</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 Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)					
Item No.	Item Description		Yes	No	REMARKS / OFFER/ BRAND
1 LOT	LAMINATOR				
	Color	White			

Power Consumption	220w			
Entry width	230mm			
Size	35.3 x 12.2 x 7.5cm			
Weight	1026 G (light weight)			
Minimum Pouch Size	credit card size			
Max Pouch Size	A4			
LAMINATOR FILM				
Microns	125			
Size	12 inches			
Length	100 meters			
UOM	roll			
PAPER SHREDDER				
Bin Capacity	22 liters			
Runtime	Up to 6 minutes			
Shred Capacity	10 sheets per pass			
WHITEBOARD WITH STAND (MAGNETIC)				
Size	4ft x 6ft			
Construction	Reversible			
	With Rolling Stand			
MANUAL PAPER CUTTER (Heavy Duty)				
Base	Metal			
Cutting Capacity	Up to 10 sheets at the same time			

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 Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)	Qty / UOM	Approved Budget for the Contract	Supply and Delivery of Nutrition and Dietetics Section (NDS) Office Supplies CY 2025 (Lot)	Qty/ UOM	Total Offered Quotation
1	LAMINATOR, white, light weight, power consumption 220w, entry width – 230mm, item size – 35.3 x 12.2x 7.5 cm, item weight 1026 g, Max pouch size – A4, credit card size	1 set Unit Price: ₱ 960.00 Total Price: ₱ 960.00			
	LAMINATOR FILM, roll, 125 microns, 12 inches, 100 meters	1 roll Unit Price: ₱ 480.00 Total Price: ₱ 480.00			
	PAPER SHREDDER, 22 liters bin capacity, runtime up to 6 minutes, shred 10 sheets per pass	1 unit Unit Price: ₱ 12,000.00 Total Price: ₱ 12,000.00			
	WHITEBOARD WITH STAND, magnetic whiteboard, 4ft x 6ft, reversible with rolling stand	2 pieces Unit Price: ₱ 6,000.00 Total Price: ₱ 12,000.00			
	MANUAL PAPER CUTTER, metal base, multi-sheet capacity, heavy duty blade, can cut up to 10 sheets at the same time	1 unit Unit Price: ₱ 2,400.00 Total Price: ₱ 2,400.00			
TOTAL AMOUNT:		Twenty-Seven Thousand Eight Hundred Forty Pesos only <u>(₱27,840.00)</u>	TOTAL AMOUNT:		

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