



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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SOLICITATION NO.: NCMH-Negotiated Procurement – Small Value Procurement  
Supply & Delivery of Laboratory (Anatomical) Supplies and Reagents CY 2020

## REQUEST FOR QUOTATION

**September 17, 2020**

Dear Sir/Madame:

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 **September 21, 2020 5:00 PM**. Kindly transact / address directly at the BAC Secretariat Office. For inquiries, you may call 531-9001 local 239 or 531-8318.

Respectfully yours,

**SGD**

**JERRY C. RODRIGUEZ, MGM-ESP**

*Supervising Administrative Officer*

*Head Secretariat, Bids and Awards Committee*

General Conditions:

1. Bid offer must meet the minimum technical specifications.
2. Delivery period shall be within a maximum period of seven (7) calendar days upon receipt of approved Purchase Order (PO) / Notice to Proceed (NTP) / 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 (Attached Official Receipt)
  - b. PhilGEPS Registration Number
  - c. Income and Business Tax Return
  - d. Omnibus Sworn Statement  
(For Corporation – Attached Corporate Secretary Certificate)  
(For Sole Proprietorship – Attached Special Power of Attorney)
  - e. Current and Valid Certificate of Product Registration (CPR) from FDA (***if applicable***)
5. Failure to comply with the stated general conditions constitutes 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.

**MARKING / LABEL OF PRICE QUOTATION**

1. Sealed Price Quotation Envelope:

<p style="text-align: center;"><b>Request for Quotation</b> <b>Supply and Delivery of <u>(Title of the Project)</u> CY 2020</b></p> <p style="text-align: center;"><b>Item/s bidden:</b></p> <p>1. _____ 2. _____</p> <p style="text-align: center;"><b>Name of Company / Bidder:</b> <b>Tel. no.:</b> <b>Fax no.:</b></p>
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2. Documentary Requirements Folder:

<p style="text-align: center;"><b>Request for Quotation</b> <b>Supply and Delivery of <u>(Title of the Project)</u> CY 2020</b></p> <p style="text-align: center;"><b>Item/s bidden:</b></p> <p>1. _____ 2. _____</p> <p style="text-align: center;"><b>Name of Company / Bidder:</b> <b>Tel. no.:</b> <b>Fax no.:</b></p>
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3. Mother Envelope:

<p style="text-align: center;"><b>Request for Quotation</b> <b>Supply and Delivery of <u>(Title of the Project)</u> CY 2020</b></p> <p style="text-align: center;"><b>Name of Company / Bidder:</b> <b>Tel. no.:</b> <b>Fax no.:</b></p> <p style="text-align: center;"><b>DO NOT OPEN ON OR BEFORE: (indicate closing date PhilGEPS)</b></p>
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**SUPPLY AND DELIVERY OF LABORATORY (ANATOMICAL) SUPPLIES& REAGENTSCY 2020**

<b>QTY.</b>	<b>UNIT OF MEASURE</b>	<b>ITEM SPECIFICATION</b>	<b>BIDDER'S SPECIFICATION</b>	<b>APPROVED BUDGET OF THE CONTRACT</b>	<b>BIDDER'S OFFER</b>
5	bottle	Eosin Y Alc. Atleast 900ml, with 2 year expiry		<b>UNIT PRICE:</b> ₱2,121.28  <b>TOTAL PRICE:</b> ₱10,606.40	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
4	bottle	Harris Hematoxylin, atleast 900ml, with 2 year expiry		<b>UNIT PRICE:</b> ₱3,550.62  <b>TOTAL PRICE:</b> ₱14,202.48	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
2	set	Papanicolau (PAP's) stain (3 x 500ml) / set, with 2 year expiry		<b>UNIT PRICE:</b> ₱4,737.78  <b>TOTAL PRICE:</b> ₱9,475.56	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
1	set	Rapid and Cytological Rapid Stain set, Triple pack / set (Fixing Solution, Acid dye, Basic dye) with 2 year expiry		<b>UNIT PRICE:</b> ₱16,262.40  <b>TOTAL PRICE:</b> ₱16,262.40	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
1	box	Test Control for Methylendioxyamphetamine (Ecstasy) with at least 1 year expiry		<b>UNIT PRICE:</b> ₱22,400.00  <b>TOTAL PRICE:</b> ₱22,400.00	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
20	box	Cover Slip, 24mm x 54-64mm, 100/box		<b>UNIT PRICE:</b> ₱533.40  <b>TOTAL PRICE:</b> ₱10,668.00	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
2	box	Filter Paper, 41 x 11cm Ashless, 100 circles / box		<b>UNIT PRICE:</b> ₱3,942.40  <b>TOTAL PRICE:</b> ₱7,884.80	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>

1	piece	Gross Laboratory Filter		<b>UNIT PRICE:</b> ₱86,240.00  <b>TOTAL PRICE:</b> ₱86,240.00	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
2	pack	Cadaver Bag, 102x38" (259.1x96.5cm); 5ml thick, 12pc/pack		<b>UNIT PRICE:</b> ₱27,104.00  <b>TOTAL PRICE:</b> ₱54,208.00	<b>UNIT PRICE:</b> ₱ <input type="text"/>  <b>TOTAL PRICE:</b> ₱ <input type="text"/>
			<b>TOTAL</b>	<b>231,947.64</b>	

Brand and model: \_\_\_\_\_ If applicable  
 Delivery period: \_\_\_\_\_ Max of 7 working 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:

\_\_\_\_\_  
COMPANY NAME

\_\_\_\_\_  
COMPANY ADDRESS

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

\_\_\_\_\_  
DESIGNATION

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