



BIDS AND AWARDS COMMITTEE

REQUEST FOR QUOTATION

PROCUREMENT OF FURNITURE & FIXTURES

RFQ NO. 2018-08-326 (R-673)

1. The Davao Regional Medical Center, hereinafter referred to as "the Purchaser", has a requirement for the Procurement of Furniture & Fixtures.
2. Procurement procedures will be conducted in accordance with the Revised Implementing Rules and Regulations of Republic Act 9184 (R.A. 9184).
3. A complete set of bidding documents may be purchased by interested bidders on **Aug. 29 – Sept. 3, 2018** the address below and upon payment of a non-refundable fee for the bidding documents in the amount of 500.00.
4. Quotations must be delivered at the PROCUREMENT SECTION/ BAC SECRETARIAT, Davao Regional Medical Center, Apokon, Tagum City on or before **September 3, 2018, 2:00 PM.**
5. Your price quotation must be quoted in Philippine Peso and must include the unit price and total price, inclusive of all taxes to be paid if the contract is awarded.
6. Price Schedule must be quoted in words as well as in figures, ***computerized/typewritten*** with no missing pages in **red folder and shall be placed and sealed in a brown envelope marked (RFQ: 18-08-326)**. All pages comprising the Documents must be duly signed for authenticity. Failure to comply is a ground for disqualification.
7. Bids shall be valid for ninety (90) days from the Opening of Bids.
8. The delivery period shall be within thirty (30) working days from the receipt of the Notice to Proceed.
9. **DELIVERY SITE: Materials Management Section, Davao Regional Medical Center, Apokon, Tagum City.**
10. The applicable rate for late deliveries is one tenth (1/10) of the one (1) percent of the cost of the unperformed portion for every day of delay.

The maximum deduction shall be ten (10) percent (10%) of the amount of contract. Once the cumulative amount of liquidated damages reaches ten (10) percent (10%) of the amount of the contract, the procuring entity shall rescind the contract, without prejudice to other courses of action and remedies open to it.
11. The DRMC reserves the right to accept or reject any quotation, and to annul the bidding process and reject all quotations at any time prior to Contract Award, without thereby incurring any liability to the affected bidder or bidders and to waive any minor defects or infirmities therein and to accept such quotation as may be considered advantageous to the government.
12. Bidders are entitled to one (1) bid only, otherwise all bids made shall automatically be rejected.
13. **The prospective bidder shall submit Certified True Copy of the following requirements in one envelope.**
 - a. **Price Schedule**
 - b. **Technical Specifications**
 - c. **Valid and Current Certificate of PhilGEPS Registration (Platinum Membership)**
 - d. **Omnibus Sworn Statement**
 - e. **Professional License/Curriculum Vitae , for Consulting Services**
 - f. **Philippine Contractors Accreditation Board (PCAB), for Infrastructure Projects**
 - g. **Certificate of Product Registration (CPR), if applicable**
 - h. **FDA License to Operate with List of Sources, if applicable**

(SGD)RHODORA M. BOISER, MPA
Chairperson, Bids and Awards Committee



Republic of the Philippines
Department of Health
DAVAO REGIONAL MEDICAL CENTER
Apokon, Tagum City



PhilGEPS Reference Number:

For Goods Offered From Within the Philippines - Price Schedule

Name of Bidder: _____

Telephone No.: _____

Address: _____

IB No. 18-08-326

Date: 08-14-18

PR No. 18-03-096; 18-03-106; 18-04-196

Date: 03-06-18; 03-09-18; 04-03-18

Resolution No: 08-673 (Negotiated Procurement - Two Failed Biddings)

Date of Opening: September 3, 2018, 2:00 PM, BAC Office

Item No.	Description	QTY	Unit	Approved Budget for the Contract (ABC)/unit	Approved Budget for the Contract (ABC)/Item	Unit Price (amount in figures and words)	Total
	TFB FROM IB 18-06-258 (PB: 07-17-18)						
1	Filing Cabinet	9	unit	12,960.00	116,640.00		
	brand						
	model/packaging						
	country of origin						
2	Office Armless Chair	8	unit	3,720.00	29,760.00		
	brand						
	model/packaging						
	country of origin						
3	Dining set	4	set	17,280.00	69,120.00		
	brand						
	model/packaging						
	country of origin						
4	Consultation Table with Chair	2	set	7,200.00	14,400.00		
	brand						
	model/packaging						
	country of origin						
5	Rotating Stool	2	unit	5,472.00	10,944.00		
	brand						
	model/packaging						
	country of origin						
	Deployment:						
	Item 1: MCC (PR No. 18-03-096)						
	Item 2: MCC (PR No. 18-03-096)-2; OGW (PR No. 18-04-196)-6						
	Item 3: NDS (PR No. 18-03-106)						
	Item 4: NDS (PR No. 18-03-106)						
	Item 5: OGW (PR No. 18-04-196)						



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	XXXXXX						
	Purpose: For the use of Different wards & units, DRMC, Apokon, Tagum City						
	Approved Budget of the Contract: PhP				240,864.00		



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TECHNICAL SPECIFICATIONS

Item No.	Purchaser's Specifications	Quantity		Supplier's Specification
1	Filing Cabinet	9	unit	
	steel			
	4 layers			
	smooth surface			
	grey color or dark green			
2	Office Armless Chair	8	unit	
	gas lifting			
	with rubberized stand			
3	Dining Set	4	set	
	steel tube: 50mm-122mm			
	black tube powder coating finish			
	8 seaters			
	tempered glass			
	8 mm (black)			
	table: 220x90x78 cm			
	chair: 42.5x49x93 cm			
4	Consultation Table with Chair	2	set	
	Consultation Table with Chair			
5	Rotating Stool	2	unit	
	leather black color			
	hydraulic steel			
	with 5 caster wheels			
	stainless			
	adjustable			

NAME OF COMPANY

ADDRESS

SIGNATURE OVER PRINTED NAME

(Duly authorized to sign the Bid)

TELEPHONE/FAX NO.

Omnibus Sworn Statement

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 of *[Name of Bidder]* with office address at *[address of Bidder]*; state title of attached document showing proof of authorization in case of representative (e.g., duly notarized Special Power of Attorney executed by the owner);

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.

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 _____

