



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



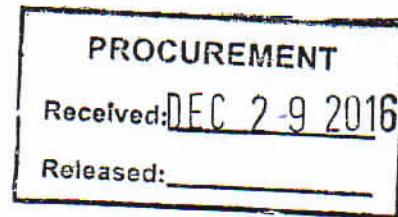
NOTICE OF AWARD

16-12-0341

PhilGEPS Reference No.: 4193098 (AA)

REGINA V. SILVERIO

TRENDS & TECHNOLOGIES, INC.
2/F ATU Plaza Bldg., Gov. Duterte St.,
Davao City
082-222-6153/0917-523-5223



Dear Ms. Silverio:

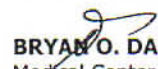
This is to *inform* you that based on the result of the *Open Competitive Bidding* conducted on *December 6, 2016* for the Procurement of **Upgrading of Telecommunication Lines for Intercom, Cables & Computer Lines (Supply, Delivery, Installation, Configuration & Commissioning of 10G Enterprise Network, IP Telephony, CCTV and Public Address System)** under ITB No. 16-11-0146 as per BAC Resolution No. 16-12-0567 that your proposal was found to be the Lowest Calculated Responsive Bid (LCRB) with a Total Contract Price of *Fourteen Million Eight Hundred Thirty Thousand Pesos (Php14,830,000.00)* inclusive of local taxes.

You are hereby requested to post your *Performance Security* equivalent to the percentage of the total Contract Price of the acceptable forms as listed below within ten (10) calendar days from receipt of the Notice of Award (NOA) and further to confer with the Medical Center Chief of the Davao Regional Medical Center, for instructions regarding the execution of this award.

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY (Equal to Percentage of the Total Contract Price)
1. Cash, Cashier's Check, Manager's Check, Bank Draft/ Guarantee confirmed by a Universal or Commercial Bank duly licensed in the Philippines	Ten Percent (10%)
2. Irrevocable Letter of Credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank duly licensed in the Philippines or used by a foreign bank	
3. Surety Bond callable upon demand issued by a surety or insurance Company duly certified by the Insurance Commission as authorized to issue such security.	Thirty Percent (30%)

The original NOA with signature on "CONFORME" shall be returned within two (2) working days upon receipt of the approved NOA.

Please bear in mind that failure to provide the performance security shall constitute sufficient ground for recession of the award.


BRYAN O. DALID, MD, FPCS, FPSGS, FPALES
Medical Center Chief II

Date: **DEC 29 2016**

Conforme:

Printed Name & Signature of Authorized Representative

Date: _____