



Republic of the Philippines
Department of Health
JOSE R. REYES MEMORIAL MEDICAL CENTER
BIDS AND AWARDS COMMITTEE

DC: 8562-5338/ 8711-9491 loc. 245

jrrmmc_bacsec@yahoo.com

REQUEST FOR QUOTATION

Date: 31 August 2021

RFQ No.: HBAC-A2-2021-08-1539

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

TAX IDENTIFICATION NO.: _____

PHILGEPS REGISTRATION NO. (if applicable): _____

Jose R. Reyes Memorial Medical Center, through its Hospital Bids and Awards Committee (HBAC), intends to procure **Twenty (20) unit Oxygen Concentrator** in accordance with section **53.2** of the 2016 Revised Implementing Rules and Regulations of the Republic Act No. 9184.

Please quote your **best offer** for this item described herein, subject to the Terms and Conditions provided at last page of this RFQ. Submit your quotation duly signed by you or your duly authorized representative **not later than 8:30 am on 7 September 2021**.

The following documents are likewise required to be submitted on the specified deadlines:

Document	Deadline	Remarks
<p>Documentary Requirements:</p> <ul style="list-style-type: none">➤ Mayor's Permit➤ Omnibus Sworn Statement (Revised)➤ Income / Business Tax Return➤ SEC/DTI Certificate➤ PhilGEPS Certificate <p>I. Standard Requirements:</p> <ul style="list-style-type: none">▪ Current and Valid Certificate of Manufacturer's compliance with ISO Certified or its equivalent▪ Current and Valid Certificate of Authorized Distributorship (if not the Manufacturer) and Notarized Certification as Local Distributor▪ Bidder's certificate that the BRAND must be in the Philippines since 2011▪ User's Manual in English Language▪ Service Manual (2 copies)▪ Latest Certificate of Traceability from the Manufacturer▪ Proposed Costing of Preventive Maintenance and Calibration Program for sophisticated equipment, consumables/ accessories.▪ Printing and Etching of DOH official logo/ letters (if possible "JRRMMC" in all	<p>To be submitted together with the Request for Quotation</p>	



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<p>equipment) in conspicuous space of the equipment but will not affect its function.</p> <ul style="list-style-type: none">▪ License to Operate▪ Tax Receipts (including the Bill of Lading/Airway Bill) upon delivery <p>II. Training Requirements</p> <ul style="list-style-type: none">▪ Training at least two (2) from end-users and one (1) from engineering <p>III. After Sales Service</p> <ul style="list-style-type: none">▪ Bidder's certificate that parts shall be available at the authorized Philippine service center/s for a period of five (5) years after the warranty period. <p>IV. Warranty Certificate</p> <ul style="list-style-type: none">▪ Minimum of two (2) years on parts and service. Warranty Certificate for parts and service, upon delivery, inspection and acceptance▪ To provide loaner unit in case of machine break down within the warranty period <p>V. Preventive Maintenance and Calibration</p> <ul style="list-style-type: none">▪ Free Quarterly preventive Maintenance and Calibration within the warranty period		
Brochure/ Technical Data/ User's Manual/ Service Manual		

For any clarification/s, you may contact us at the telephone no. **8711-9491 local 245 or 8562-53-38** or email address at **jrrmmc_bacsec@yahoo.com**.


EMELITO VALDEZ TAN, M.D.
Chairman, HBAC-A-2

INSTRUCTIONS:

1. Accomplish this RFQ correctly and accurately.
2. Do not alter the contents of this form in any way.
3. All technical specifications are mandatory. Failure to comply with any of the mandatory requirements will disqualify your quotation.
4. Failure to follow these instructions will disqualify your entire quotation.

After having carefully read and accepted the Terms and Conditions, I/ We submit our quotation/s for the item/s as follows:

PR NO.: 2021-08-3751 (IM-Pulmonary Unit)			
Technical Specifications	Yes	No	Remarks
OXYGEN CONCENTRATOR			
Branded, Brand New			
Technical specifications:			
➤ portable with molded handle,			



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<ul style="list-style-type: none">➤ flow up to 5LPM, oxygen concentration of 90-96%;➤ sound levels up to 43 dBA, weight up to 14kgs,➤ Power requirements: 220-240V, 60Hz;➤ Includes:<ul style="list-style-type: none">• Bubbler,• nasal cannula			
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FINANCIAL OFFER:

Please quote your **best offer** for the item/s below. Please do not leave any blank items. Indicate "0" if the item being offered is for free.

OXYGEN CONCENTRATOR <i>(Please indicate Brand name, Model and Country of Origin)</i>				
Approved Budget for the Contract (ABC)	Duration/ Quantity (A)	Unit	Offered Price/ unit (B)	Total Offered Quotation (A x B)
65,000.00	20	unit		In Words: _____ _____ In Figures: _____ _____

TERMS OF PAYMENT: *(Please check one)*

___ Terms/ Deferred Payment

___ Cheque upon Delivery (COD)

Note: No Clearing time before the delivery

DELIVERY PERIOD: 7 WORKING DAYS

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of **thirty (30) calendar days** from the date of the receipt of Purchase Order/ Job Order.
3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties, and/ or levies payable.
4. Award of the contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest-rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
5. Any interlineations, erasures, or overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
6. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
7. JRRMMC shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
8. The committee reserves the right to reject any and all bids, declare a failure of bidding any time prior to the contract award, or not to award the contract, without thereby incurring any liability, and make no assurance that a contract shall be entered into as a result of the bidding.

Signature over Printed Name

Position/ Designation

Office Telephone/ Fax Number

Email address/es