

Republic of the Philippines

Department of Education

REGION IV-A CALABARZON

REQUEST FOR QUOTATION

The Department of Education Region IV-A (CALABARZON) through its Bids and Awards Committee, intends to procure "SUPPLIES FOR THE 2023 ANNUAL PHYSICAL AND LABORATORY EXAMINATION WITH VACCINATION OF DEPED REGIONAL EMPLOYEES ON NOVEMBER 10, 17, & 24, 2023" in accordance with Alternative Method of Procurement under Section 53.9 (Negotiated Procurement – Small Value Procurement) of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184.

The Approved Budget for the Contract (ABC) is **SIXTY-FOUR THOUSAND EIGHT HUNDRED TWENTY-NINE PESOS AND 50/100 (Php64,829.50).**

Please quote your **Best Offer** for the item/s described herein, **subject to the Terms and Conditions** provided at the bottom/last page of this Request for Quotation (RFQ). Submit your proposal/quotation duly signed by your authorized representative **not later than November 6, 2023 at 9:00 A.M.** at the BAC Secretariat, DepEd Region IV-A CALABARZON, Gate 2 Karangalan Village, Cainta, Rizal. **Quotations may also be submitted through facsimile or email at the address and contact numbers indicated below**.

A copy of your 2023 Business/Mayor's Permit, PhilGEPS Registration Number and Latest Income/Business Tax Return are required to be submitted along with your signed quotation/proposal. A valid Certificate of PhilGEPS Registration (Platinum Membership) may be submitted in lieu of the Business/Mayor's Permit.

Moreover, a **Notarized Omnibus Sworn Statement (GPPB-prescribed forms)** will also be required to be submitted prior to award.

For any clarification, you may contact us at telephone no. (02) 8682-2114 or by email at bac.calabarzon@deped.gov.ph.

LOIDA N. NIDEABAC Chairperson

ROA/Pro3







Address: Gate 2, Karangalan Village, Cainta, Rizal

Telephone No.: 02-8682-2114

Email Address: region4a@deped.gov.ph

Website: depedcalabarzon.ph



| Date: | |
|---|--|
| Name of Company: | |
| Address: | |
| Name of Store/Shop (if applicable): | |
| TIN: | |
| PhilGEPS Registration Number: | |

INSTRUCTIONS:

- (1) Accomplish this RFQ correctly, accurately and completely.
- (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.

Sir/Madam:

After having carefully read and accepted the Terms and Conditions in the Request for Quotation, hereunder is our quotation for the item/s as follows:

TECHNICAL SPECIFICATION

- (1) Please quote your <u>best offer</u> for the item/s below. <u>Please do not leave any blank items.</u> <u>Indicate "0" if item being offered is for free.</u>
- (2) Bidders must state "Comply" or any equivalent term in the column "Bidder's Statement of Compliance" against each of the individual parameters of each Specification.

| Item | Description | Total QTY | Bidder's Statement of Compliance ("Comply" or "Not Comply") | Unit Cost (VAT Inclusive) | Total Cost (VAT Inclusive) |
|------|--|--------------|--|------------------------------|-------------------------------|
| 1. | Amlodipine 5mg, Ritemed Php6.00/pc | 200 pcs | | | |

| 2. | Aluminum Hydroxide Magnesium Hydroxide Simeticone, Kremil S Php7.75/pc | 200 pcs | | |
|-----|---|----------------|--|--|
| 3. | Hydrogen Peroxide 120 ml Php32.00/bottle | 1 bottle | | |
| 4. | Carbocisteine 500 mg Php11.00/pc | 300 pcs | | |
| 5. | Hypromellose 3mg/ml 7.5ml Eye Drops Php104.00/bottle | 10 bottles | | |
| 6. | Ibuprofen 235 + Paracetamol 325mg Tablet, Alaxan | 50 pcs | | |
| 7. | Php8.50/pc Levocetirizine 5mg, Ritemed | 300 pcs | | |
| 8. | Php10.00/pc Lithium Battery AA, Pack of 8 | 3 packs | | |
| 9. | Php1,500.00/pack Losartan 100 mg, Ritemed | 300 pcs | | |
| 10. | Php14.50/pc Hydrocortisone 10mg/g Cream, 15g | 1 tube | | |
| 11. | Php250.00/tube Mupirocin 20g/g Ointment 10g | 3 tubes | | |
| 12. | Php250.00/tube Omeprazole 40mg Php40.00/tablet | 300 tablets | | |
| 13. | ORS (Hydrite) Php16.50/sachet | 485 sachets | | |

| 14. | Paracetamol 500mg Php4.00/pc | 500 pcs | | |
|-----|--|---------------------------|-------------|--|
| 15. | Phenylephrine and Paracetamol Tab (Decolgen No Drowse) Php7.00/pc | 500 pcs | | |
| 16. | Retinol Palmitate (Vit. A) 5000IU DL-Alpha Tocopheryl Acetate (Vit. E) 100 IU Ascorbic Acid (Vit. C) 500mg Zinc Sulfate 25mg, (CONZACE) Php12.50/capsule | 400 capsule s | | |
| 17. | Amoxicillin 500mg (Ritemed) Php8.00/capsule | 315 capsule s | | |
| 18. | Co amoxiclav 625mg (Ritemed) Php35.00/capsule | 147 capsule s | | |
| 19. | Accucheck Instant Blood Glucose Meter with 25 Strips (Accucheck) Php2,000.00/pc | 1 pc | | |
| 20. | Accucheck Instant Test Strips, 50 Strips Php1,500.00/pack | 1 pack of 50 strips | | |
| 21. | Accucheck Softclix Lancets 25s Php200.00/pack | 1 pack of 25s | | |
| 22. | Azithromycin 500mg Php95.00/capsule | 27 capsule s | | |
| | | | TOTAL COST: | |

^{*}The above quoted prices are inclusive of all costs and applicable taxes.

SCHEDULE OF REQUIREMENTS Bidders must state "Comply" or any equivalent term in the column "Bidder's Statement of Compliance" against each of the individual parameters of each SCHEDULE. BIDDER'S STATEMENT OF COMPLIANCE ("Comply" or "Not Comply")

| FINANCIAL OFFER | | | | |
|---|--|-------------|--|--|
| Approved Budget for the Contract Your Total Offered Quotation | | | | |
| מ | Shn64 820 E0 | In words: | | |
| Php64,829.50 | | In figures: | | |
| <u>Payment</u> <u>Details:</u> | Payment shall be made promptly, but in no case later than sixty (60) days, through Land Bank's LDDAP-ADA/Bank Transfer facility after submission of billing statement/invoice and upon fulfilment of other obligations as stipulated in the contract as well as upon inspection and acceptance of the goods by the end user. | | | |
| Banking Institution | | | | |
| Account Number | | | | |
| Account Name | | | | |
| Branch | | | | |

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 sixty (60) calendar days from the date of submission of quotation.
- 3. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable.
- 4. Quotations exceeding the Approved Budget for the Contract shall be rejected.
- 5. Award of contract shall be made to the Lowest Calculated and Responsive 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.
- 6. 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.
- 7. The item/s shall be delivered according to the requirements specified in the Technical Specifications.
- 8. The Department of Education Region 4A shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- 9. In case two or more bidders are determined to have submitted the Lowest Calculated Quotation/Lowest Calculated and Responsive Quotation, the DBM shall adopt and employ "draw lots" as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005.
- 10. Payment shall be processed after delivery and upon the submission of the required supporting documents, in accordance with existing government accounting rules and regulations. Please note that the corresponding bank transfer fee, if any, shall be chargeable to the contractor's account.
- 11. Liquidated damages equivalent to one tenth of one percent (0.1%) of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The Department of Education Region IV-A shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other courses of action and remedies open to it.

| Signature over Printed Name |
|-----------------------------|
| Position/Designation |
| Office Telephone Number |
| Fax/Mobile Number |
| E-mail Address/es |