

Republic of the Philippines PROVINCE OF BENGUET

La Trinidad



BIDS AND AWARDS COMMITTEE (BeGH) (DRUGS AND MEDICINES / MEDICAL SUPPLIES) Bid Solicitation No.: SVP - 2022-0019 February 11, 2022 Purchase Request No.: 2022-02-0317 Date **MEMORANDUM TO:** Mr./Ms.: SALINIA L. CARBONEL (Canvasser) Kindly provide appropriate dealers/ establishments copy of the attached request for quotation and/or Purchase of 3 units oxygen concentrator, 0-10 LPM with an ABC of 135,000.00 solicitation to Bid for the to be used by DMDH Their quotation /Bids shall be opened on February 23, 2022 RECEIVED NAME OF ESTABLISHMENT **ADDRESS** Name Signature Date 1. 2. 3. 4. 5. 6. 7. 8. 9.

BRIAN) KISPIN

CERTIFICATION

The undersigned, hereby jointly and severally certiffy to have given each of the above dealers / establishments a copy of the solicitation / bid papers and that no one, only those indicated above, failed to submit their quotations before the time of opening the same.

CANVASSER/S:

10.

SALINIA L. CARBONEL Signature over printed name/s



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BIDS AND AWARDS COMMITTEE (BEGH) (DRUGS AND MEDICINES / MEDICAL SUPPLIES)



Purchase Request Number: 2022-02-0317

Purchase of 3 units oxygen concentrator, 0-10 LPM Name of the Project:

Location of the Project: **DENNIS MOLINTAS DISTRICT HOSPITAL**

Date: February 11, 2022 Quotation No.: SVP - 2022-0019 CAFOA No.: 100220100818

REQUEST FOR QUOTATION

Sir/Madam:

Kindly indicate your price quotation/s for the item/s listed below taking into consideration the specifications; submit this document duly						
signed by you or your authorized representative, to this office not late_	9:00 AM	on	WEDNESDAY	February 23, 2022		
at the BAC HEALTH, 1st Floor, Benguet General Hospital, La Trinida		-				

Indicate also the shortest delivery period should you opt to. You may fax your quotations through Telefax No. 074-422-55-06 or thru e-mail

We may purchase the item/s from your company if the found to be reasonable and advantageous to the Benguet General Hospital, but we reserve the right to accept ot reject the offer or all quotations not found in order.

Thank you very much.

ATTY. BUTAN J. ORISE

INSTRUCTIONS:

"PLEASE SEAL YOUR QUOTATIONS"

- 1. All entries must be Typewritten or handwritten (Please write legible and no use of pencil).
- 2. Delivery period within ____14__ (supplies, drugs and medicines, etc.) / 45 (Equipment) Calendar Days.
- 3. Warranty shall be for a period of three (3) months for supplies and materials and one (1) year for equipment reckoned from the date of acceptance by procuring entity.
- 4. Price validity shall be for a period of 120 calendar days.
- 5. Photocopy (Stamp "CERTIFIED TRUE COPY OF THE ORIGINAL" with name and signature of the following requirements to be submitted after opening and upon notification from the BAC.
 - a. Mayor's/Business Permit. b. PhilGEPS Registration No.

 - c. Submit original copy of complete (paragraph 1 to 10) Omnibus Sworn Statement (in addition to requirements a and b if the awarded item/s is above Php 50, 000.00).
 - d. Income / Business Tax Return (in addition to requirements a, b, and c if the awarded item/s is above PhP 500, 000).
 - e. Valid and current Certificate of Product Registration (CPR) issued by FDA of the DOH: if applicable
 - f. Brochure for Medical equipment: if applicable

- g. Material Data Safety Sheet for Laboratories, Reagennts: if applicable
- 6. The procuring entity reserves the right to waive any defects in the tender or offer as the right to accept the bid most advantageous to the provincial
- 7. ALL ERASURES SHOULD BE COUNTERSIGNED.

Item No.	QTY	UNIT of	ABC UNIT PRICE	ITEM & DESCIPTION (SPECIFICATIONS)	BRAND/ OFFER/ COMPLIANCE TO	UNIT PRICE	PRICE VALIDITY	DELIVERY PERIOD	TOTAL AMOUNT
1	3	Unit		OXYGEN CONCENTRATOR, 0-10 LPM	SPECIFICATIONS	1111011	VAIGIBILI	T EXTOR	
	3	Onic	45,000.00	Specifications:				-	
				Oxygen flow rate range: 10L/Min(Can be adjusted 1-10L/min)					
				Oxygen concentration: ≥93%+/-3%					
				Noise Level: ≤600Db(A)					
				Outlet Pressure: 0.05MPA					
				Atmospheric pressure range: 30-60Kpa					
				Operation and function: Oxygen generation,					
				Nebulization, Timer					
	Package Size			Package Size: 480 x 435 x 755mm					
				Product Size: 390 x 350 x 720mm					
				GW/NW: 30kg/29.5kg					
				Color: White					
				Rated Power: 750VA					
				Power supply: 220v, 50hz					
		DENNIS MOLINTAS DISTRICT HOSPITAL							
PURPOSE: For use of DMMH.						ů.	135,000.00		
CANV	ASSER:	S:							-la
			CEDTIEICA	TION					

CERTIFICATION

I hereby certify that I have personally conducted this canvass and that the price/s quoted is/are true and correct and the signature of the Representative of the establishment who submitted the quotation/s is/are genuine.

After having carefully read and accepted your terms and conditions, I hereby submit the above quotations for your appropriate action.

(Name of E	Establishment per O.R. & address)
(Signature over	r Printed Name of Owner/Representative
(Telephone/C	ellphone Number or e-mail addres

SALINIA	1.	CARR	CONFI

PRINTED NAME & SIGNATURE OF AUTHORIZED CANVASSER