



## Bid Notice Abstract

### Request for Quotation (RFQ)

**Reference Number** 8546092  
**Procuring Entity** PROVINCE OF BENGUET  
**Title** FIVE (5) BOTS. OF AMOXICILLIN, ETC. BY PVET  
**Area of Delivery** Benguet

<b>Solicitation Number:</b>	SV-0506-22	<b>Status</b>	<b>Active</b>
<b>Trade Agreement:</b>	Implementing Rules and Regulations	<b>Associated Components</b>	1
<b>Procurement Mode:</b>	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	<b>Bid Supplements</b>	0
<b>Classification:</b>	Goods	<b>Document Request List</b>	3
<b>Category:</b>	Veterinary Products and Supplies	<b>Date Published</b>	22/03/2022
<b>Approved Budget for the Contract:</b>	PHP 71,440.00	<b>Last Updated / Time</b>	22/03/2022 00:00 AM
<b>Delivery Period:</b>	21 Day/s	<b>Closing Date / Time</b>	29/03/2022 08:30 AM
<b>Client Agency:</b>			
<b>Contact Person:</b>	JULIE P. TABCAO BAC -GOODS SEC CHAIRPERSON Benguet Province, La Trinidad Benguet Philippines 2601 63-74-4222609 Ext.135  pgobacgoods@benguet.gov.ph		
<b>Description</b>			
FIVE (5) BOTS. OF AMOXICILLIN, ETC.			
Please refer to attached Request for Quotation *****			
<b>Other Information</b>			
Download the attached RFQ and Memorandum to Canvassers by clicking the figure opposite the Associated Components on this page then submit both documents at BAC Office, 2nd floor, Capitol Building, La Trinidad or through e-mail at pgobacgoods@benguet.gov.ph			

**Created by** Marie Claire Salbino Baldos  
**Date Created** 21/03/2022

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Republic of the Philippines  
**PROVINCE OF BENGUET**  
 La Trinidad  
**BIDS AND AWARDS COMMITTEE**  
**(GOODS AND SERVICES)**

Bid Solicitation No.: SV-0506-22 / March 8, 2022  
 Purchase Request No.: 2022-03-0572 / Date

**MEMORANDUM TO:**

Mr./Ms.: ROCKY M. SALUPEN  
 (Canvasser)

Kindly provide appropriate dealers/ establishments copy of the attached request for quotation and/or solicitation to Bid for the Purchase of 5 bot amoxicillin LA 150mg etc. with an ABC of 71,440.00 to be used by PVET Their quotation /Bids shall be opened on March 29, 2022

NAME OF ESTABLISHMENT	ADDRESS	RECEIVED		
		Name	Signature	Date
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

**MIRIAM V. TIONGAN, DVM**  
 Chairperson

CERTIFICATION	CERTIFICATION
<p>I/We the undersigned, hereby jointly and severally certify to have given each of the above dealers/establishments a copy of the solicitation bid papers and submit their quotations before the time of opening of the same.</p> <p>CANVASSER/S:</p> <p><b>ROCKY M. SALUPEN</b>  <i>Signature over printed name/s</i></p> <p>/bhelle28</p>	<p>This is to certify that the RFQ received is a download copy and submitted through email / courier.</p> <p><b>NOLI U. GUIAD</b>  <i>Administrative Officer V</i></p>



Republic of the Philippines  
PROVINCE OF BENGUET  
La Trinidad  
**BIDS AND AWARDS COMMITTEE**  
**(GOODS AND SERVICES)**

Purchase Request Number: 2022-03-0572  
Name of the Project: Purchase of 5 bot amoxicillin LA 150mg etc.  
Location of the Project: PVET  
Account Code: 5-02-03-040

Date: March 8, 2022  
Quotation No.: SV-0506-22  
CAFOA No.: 22-03-002841  
Appropriation No.: 100220302587

## 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 later than 8:30 am on TUESDAY March 29, 2022 at the BAC Goods and Services Office, 2nd Floor, Capitol Building, La Trinidad, Benguet.

Indicate also the shortest delivery period should you opt to. You may fax your quotations through Telefax No. 074-422-2004 or thru e-mail at [pgobacgoods@benguet.gov.ph](mailto:pgobacgoods@benguet.gov.ph) / [bacgoodbenguet@gmail.com](mailto:bacgoodbenguet@gmail.com).

Should your quotation/s be found reasonable, procurement shall ensue. The Provincial Government however, reserves the right to accept or reject your offer or quotation/s if found not in order.

Thank you very much.

MIRIAM V. TONGAN, DVM  
Chairperson

**REQUIREMENTS:**

- This Request Form must be duly accomplished; all entries must be Typewritten or handwritten legibly and in pen.
- Delivery period shall be within 21 calendar days
- 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 the provincial government, through the Provincial General Services Office.
- Price validity shall be for a period of **120 calendar days**.
- Documentary requirements **to be submitted with this RFO:**
  - Mayor's/ Business Permit (**proof of renewal if expired**)
  - BIR Certificate of Registration
  - PhilGEPS Registration No. \_\_\_\_\_ (**kindly indicate**)
  - Lates Income/ Business Tax Return (**if the ABC is above Php 500,000.00**)

*\* In lieu of a and c above, certified true copy of PhilGEPS Platinum membership may be submitted*
- Submit original copy of complete (paragraphs 1 to 10) Omnibus Sworn Statement **within three (3) days from Notice of this Body if the aggregate total ABC of the items quoted exceeds Php 500, 000.00**
- The procuring entity reserves the right to waive any defects in the tender or offer as well as the right to accept the bid most advantageous to the provincial government.

**NOTE:**

- All erasures to be countersigned.
- Kindly seal this document upon submission to the BAC Goods and Services Office

Item No.	QTY	UNIT	ITEM & DESCRIPTION (SPECIFICATIONS)	BRAND/ OFFER/ COMPLIANCE TO SPECS.	UNIT PRICE	TOTAL	Approved Budget for the Contract (ABC)
<b>Antibiotics</b>							
1	5	bottle	Amoxicillin L.A 150 mg/ml 100 ml injectable			3,800.00	
2	1	bottle	Marbofloxacin, 100 ml injectable			3,250.00	
3	3	bottle	trimethoprim 40 mg, Sulfamethoxy pyridazine 200mg/ Cotrimoxazole 200 mg/ 40 mg, 100 ml injectable			2,280.00	
4	12	bottle	Enrofloxacin, 50mg/ ml 5% solution for injection IM, SC, 100 ml			9,600.00	
5	1	bottle	Tiamulin hydrogen fumarate, 200 mg/ ml, 100ml			1,500.00	
6	1	bottle	Tylosin 100 ml injectable			855.00	
7	2	bottle	Oxytetracycline long-acting injectable 200 mg/ml, 100 ml			1,510.00	
8	1	bottle	Doxycycline injectable 100 ml			885.00	
<b>Dewormer</b>							
9	2	bottle	Febantel+ Pyrantel Embonate+ Praziquantel tablets 50s			4,800.00	
10	6	bottle	Pyrantel pamoate + praziquantel, 60ml bottle			1,800.00	
11	5	bottle	Albendazole 150mg/ ml 1 liter oral solution			9,500.00	
<b>Emergency Drugs</b>							
12	10	ampule	Epinephrine , 1 ml			1,100.00	
<b>External Parasiticide</b>							
13	4	vial	Doramectin, 1% 50ml vial			3,750.00	
14	15	canister	Dichlofenthion wound spray 86 grams			5,400.00	
<b>Disinfectant</b>							
15	20	sachet	Benzalkonium chloridde 2.5%/ L chelating agent 5%/ L non-ionic surfactant, 20ml			1,330.00	
<b>Pain Reliever/ Analgesic</b>							
16	2	bottle	Dexamethasone, 1mg/ml, 100ml, inj.,			1,180.00	
17	1	bottle	Tolfenamic Acid 100 ml inj.			2,600.00	
<b>Expectorant/ Mucolytic</b>							





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 La Trinidad  
**BIDS AND AWARDS COMMITTEE**  
**(GOODS AND SERVICES)**

Purchase Request Number: **2022-03-0572** Date: **March 8, 2022**  
 Name of the Project: **Purchase of 5 bot amoxicillin LA 150mg etc.** Quotation No.: **SV-0506-22**  
 Location of the Project: **PVET** CAFOA No.: **22-03-002841**  
 Account Code: **5-02-03-040** Appropriation No.: **100220302587**

18	2	bottle	Bromhexine 100ml				750.00
			<b>Vitamins &amp; Mineral Supplements</b>				
19	5	bottle	Butaphosphan, cyanocobalamin, 100mg/ 50mcg/ml inj., IV, IM, SC coforta				2,425.00
20	12	bottle	Iron Dextran + Cyanocobalamin, 10 doses				1,620.00
21	5	bottle	Calcium borogluconate+ Mg gluconate 100ml injection				1,875.00
22	5	bottle	Calcium borogluconate, 250 mg, 100ml				1,750.00
23	1	box	Vitamin K, phytomenadione 1 mL, 10s <b>Estrus Synchronizer</b>				780.00
24	1	bottle	Dinoprost tromethamin injection 5mg/ mL, 30ml <b>Anesthetics</b>				2,600.00
25	3	bottle	Tiletamine-Zolazepam HCL, 5 ml, 250 mg/ml, Inj. <b>PVET</b>				4,500.00
<b>PURPOSE:</b> To be used in the prevention and control of animal diseases							<b>71,440.00</b>

**DEALER'S OFFER (IF APPLICABLE)**

Brand and Model: \_\_\_\_\_ Warranty period for supplies & materials: \_\_\_\_\_  
 Delivery Period: \_\_\_\_\_ Price Validity Period: \_\_\_\_\_

**CANVASSERS:**

**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 Establishment per O.R. & Address)

\_\_\_\_\_  
 (Signature over Printed Name of Owner/Representative)

\_\_\_\_\_  
 (Telephone/Cellphone Number or e-mail Address)

**ROCKY M. SALUPEN**

**PRINTED NAME & SIGNATURE OF AUTHORIZED CANVASSEER**

\_\_\_\_\_  
 Date