



Republic of the Philippines
DEPARTMENT OF HEALTH
FIELD OPERATIONS
CENTER FOR HEALTH DEVELOPMENT NO.1
ILOCOS TRAINING AND REGIONAL MEDICAL CENTER
City of San Fernando, La Union



PHIC Accredited Healthcare Provider
Tel No. (072) 700-3719 Email address:itrmc2010@yahoo.com website: http://www.itrmc.doh.gov.ph
Certified ISO9001:2015 since 2016 with Certificate No. SCP000121Q

Mother-Baby Friendly Hospital
"A No Smoking Facility"

Request for Quotation

(Name and Address of Company)

Date : January 28, 2021
Quotation No.: 2020-12-1319R

Please quote your best offer for the item/s described herein, subject to the Terms and Conditions below. Submit your quotation duly signed by you or your duly authorized representative not later than _____

NORBERTO G. PRELADSE, JR., RN, MAN
HBAC Chairperson

TERMS AND CONDITIONS:

- Bidder shall provide all information required in this form;
- Bidder shall attach original or scanned colored copy of brochure/s showing specifications of the product/s being offered;
- Bidder shall submit sample, if required, within two (2) working days upon notice, or as instructed in the description box below;
- Price quotation/s shall include all taxes, duties, and/or levies payable;
- Price Quotation/s must be valid for a period of at least 30 calendar days from the date of submission;
- Price Quotation/s exceeding the ABC shall be automatically rejected;
- Interlineations, erasures, or overwritings shall be valid only if they are signed by you or any of your duly authorized representative/s;
- Unless otherwise indicated, evaluation and award shall be made on a per item basis;
- Contract shall be awarded to the bidder with the lowest calculated 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;
- In case two or more bidders are determined to have submitted the lowest calculated responsive quotation, "Toss Coin" shall be employed as the tie-breaking method to determine the final bidder to whom the contract shall be awarded;
- Bidder shall submit within two (2) calendar days upon notification from the BAC Secretariat, thru e-mail, text message or phone call, the following documents: Mayor's Permit, PHILGEPS Registration Number, Professional License/Curriculum Vitae (additional for Consulting Services), PCAB License (additional for Infra), Income/Business Tax Return (For ABCs Above Php 500,000.00), and Omnibus Sworn Statement (For ABCs Above Php 50,000.00).

After having carefully read and accepted your Terms and Conditions, I/We submit our price quotations below.

ITEM NO.	ITEM & DESCRIPTION	ABC PER UNIT	TOTAL ABC	QTY/UNIT	BRAND AND MODEL	UNIT PRICE (inclusive of taxes)	TOTAL PRICE (inclusive of taxes)
1	Cetuximab 100mg/vial	14,718.00	220,770.00	15	vial		
	*Note: Please submit updated Certificate of Product Registration (CPR)						
	For patients with metastatic KRAS- wild type colorectal Cancer						
			220,770.00				

RFQ-2020-12-1319, 07-Dec-2020

Delivery Period :
Warranty :
Price Validity :

Res No.	n/a
SAPP No.	12-242
PR/JO No.	NP-SVP
	2020-11-3379
Date:	11/19/2020

VCC 1/28/2021

Canvassed by:

ANNIE VILLAMIL MARLON RYAN ESPRITU KRISTINE BALLON VANESSA CABADING DANIELLE ANNE F. DINGGONG WINLOVE BORGONIA

Signature over Printed Name
Position / Designation
Tel. No. / Cellphone No. and E-mail address:
Date