



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



Mother-Baby Friendly Hospital



"A No Smoking Facility"

Tel No. (072) 607-6418/6422; Telefax: (072) 700-3719 Email address: itrmc2010@yahoo.com website: http://www.itrmc.doh.gov.ph

Certified ISO9001:2015 since 2016 with Certificate No. SCP000121Q



Request for Quotation

(Name and Address of Company)

Date : October 1, 2020

Quotation No.: 2020-10-1164

Please quote your lowest price (price must be inclusive of tax) on the item/s listed below, subject to the General Conditions, stating the shortest time of delivery and submit quotation duly signed by your representative and properly sealed.

NORBERTO G. PREPOSE, JR., RN, MAN

HBAC Chairperson

REQUIREMENTS:

- ALL ENTRIES MUST BE **TYPEWRITTEN** OR **WRITTEN LEGIBLY**.
- BIDDER SHALL ATTACH ORIGINAL OR SCANNED COPY (COLORED) OF BROCHURES SHOWING SPECIFICATIONS OF THE PRODUCT BEING OFFERED.
- BIDDER SHALL SUBMIT SAMPLE WITHIN TWO (2) WORKING DAYS (IF REQUIRED) UPON NOTICE.
- SUPPLIER SHALL SUBMIT WITHIN TWO (2) CALENDAR DAYS UPON NOTIFICATION FROM THE BAC SECRETARIAT THROUGH E-MAIL, TEXT MESSAGE OR PHONE CALL, THE FOLLOWING: MAYOR'S PERMIT, PROFESSIONAL LICENSE/CURRICULUM VITAE (FOR CONSULTING SERVICES), PHILGEPS REGISTRATION NUMBER, PCAB LICENSE (FOR INFRA), INCOME/BUSINESS TAX RETURN (FOR ABCs ABOVE PHP 500,000.00) AND OMNIBUS SWORN STATEMENT (FOR ABCs ABOVE PHP 50,000.00).**

ITEM NO.	ITEM & DESCRIPTION	ABC PER UNIT	TOTAL ABC	QTY/UNIT		UNIT PRICE (inclusive of taxes)	TOTAL PRICE (inclusive of taxes)
1	NEURO ALTAR TABLE S/S (Adjustable Height)	65,000.00	65,000.00	1	pc		
	with heavy duty caster wheel at least 4 inches, with lock						
	*see attached drawing						
	Provision of NEURO ALTAR TABLE. (I.O. # M20-538)						
			65,000.00				

HBAC Resolution No.

n/a

SAPP No.

09-212

9/30/2020

PR/JO 2020-09-2909

NP-SVP

No.

Date: 9/18/2020

VCC

10/1/2020

Brand and Model :

Delivery Period :

Warranty :

Price Validity :

After having carefully read and accepted your General Conditions, I/We quote you on the item at prices noted above.

Signature over Printed Name

Tel. No./Cellphone No./E-mail address

Date

Canvassed by:

ANNIE VILLAMIL MARLON RYAN ESPIRITU KRISTINE BALLON VANESSA CABADING DANIELLE ANNE F. DINGDING WINLOVE BORGONIA

