

# Department of Health Central Luzon Center for Health Development MARIVELES MENTAL WELLNESS AND GENERAL HOSPITAL



P. Monroe Street, Poblacion, Mariveles, Bataan, Philippines, 2105 Int No: 09688545320 Email: procurement@mmwgh.gov.ph; procurement.mmwgh@gmail.com; Website: mmwg

# **REQUEST FOR QUOTATION**

Date: October 25, 2023 PR No.: 2023-10-0694 (DRRMH)

| Α.                  |
|---------------------|
| Business Name:      |
| Address:            |
| Contact No./ Email: |

TIN:

#### B. Sir/ Madam:

The Mariveles Mental Wellness and General Hospital (MMWGH) through its Bids and Awards Committee invites all eligible and PhilGEPS-registered suppliers, contractors and consultants to quote the best offer for the item/s described herein subject to the Terms and Conditions and/or Technical Specifications and within the Approved Budget for the Contract. (ABC)

### Required Documents/ Information to be submitted as attachments to the quotation/ Proposal

- PhilGEPS Registration Number/ Certificate
- Tax Clearance

· Mayor's/ Business Permit

• Sample Invoice/ O.R./ C.R.

- DTI/ SEC Certificate

• BIR Form 2303

### C.

Omnibus Sworn Statement (for ABCs above 50K; for winning bidder only)

Income/ Business tax Return (for ABCs above 500K)

This pro-forma quotation maybe submitted through registered or electronic mail to the BAC Secretariat at above address or email to procurement@mmwgh.gov.ph \_, 5PM subject to the following Terms and Conditions: or procurement.mmwgh@gmail.com on or before \_November 3, 2023\_

- 1 All entries shall be typed or written in a clear legible manner
- 2 All prices offered herein are valid, binding and effective for THIRTY (30) calendar days upon issuance of this document. Alternative bids shall be rejected.
- 3 Price quotations to be denominated in Philippine Peso shall include all applicable government taxes subject to (BIR 2307) 5% VAT/ 1% Non-VAT and (BIR 2307) 1% EWT (Goods) or 2% EWT (Services) deductions
- 4 MMWGH may require you to submit additional documents that will prove your legal, financial and technical capability to undertake this contract
- 5 Salient provisions of the Revised IRR (RIRR) of Republic Act (RA) 9184: Section 68 Liquidated Damages and Section 69 Imposition of Administrative Penalties shall be observed
- 6 MMWGH reserves the right to reject any and all quotations, declare a failure, or not award the contract pursuant to Section 41 of the same RIRR
- 7 In case of tie quotations, the BAC shall adopt and employ "toss coin" as the tie-breaking method to finally determine the single winning provider in accordance with GPPB Circular 06-2005
- 8 In case supplier's pro forma quotation is submitted, conditions will be governed by the submitted signed Request for Quotation/Proposal and/or Technical Specifications
- 9 Delivery terms: Delivery to MMWGH within ten (10) working days upon receipt of Purchase Order (PO) or within the working days indicated in the PO.
- 10 Payment terms: Fifteen (15) working days upon completion of delivery

Very Truly Yours

Sgd VINCENT A. ISIP, MPA

Chief Administrative Officer

D.

| Item No. | QTY | Unit   | ABC                             | Technical Specfications/ Description            | (to be filled up by the supplier) |                 |              |
|----------|-----|--------|---------------------------------|---|-----------------------------------|-----------------|--------------|
|          |     |        |                                 |   | Brand/ Model                      | Unit Price      | Total Amount |
| 1        | 16  | рах    | 70,400.00                       | Provision of Hotel Accommodation for the        |                                   |                 |              |
|          |     |        |                                 | Participants of DRRM-H Performance              |                                   |                 |              |
|          |     |        |                                 | Implementation Review 2023 (December 4-5, 2023) |                                   |                 |              |
|          |     |        |                                 | Hotel Accommodation (2days/1night)              |                                   |                 |              |
|          |     |        |                                 | Twin Sharing                                    |                                   |                 |              |
|          |     |        |                                 | Triple Sharing                                  |                                   |                 |              |
|          |     |        |                                 | Quadruple Sharing                               |                                   |                 |              |
|          |     |        |                                 | Meals   |                                   |                 |              |
|          |     |        |                                 | Day 1 - AM Snacks, Lunch, PM Snacks, Dinner     |                                   |                 |              |
|          |     |        |                                 | Day 2 - Breakfast, AM Snacks, Lunch, PM Snacks  |                                   |                 |              |
|          |     |        |                                 | **Nothing Follows**                             |                                   |                 |              |
|          |     |        |                                 |   |                                   |                 |              |
|          |     |        |                                 |   |                                   |                 |              |
|          |     |        |                                 |   |                                   |                 |              |
|          |     |        |                                 |   |                                   |                 |              |
|          |     |        |                                 |   |                                   |                 |              |
|          |     |        |                                 |   |                                   | Total Amount in |              |
|          |     |        |                                 |   |                                   | Figures         |              |
|          |     |        |                                 |   |                                   | Total Amount in |              |
|          |     |        |                                 |   |                                   | Words           |              |
|          |     | Total: | 70,400.00<br>will invalidate yo |   |                                   |                 |              |

RFQ served by:

**RANDOPH B. ABUYO** Canvasser

Sgd

Printed Name/Signature of Bidder

| 0        |       |
|----------|-------|
| Sgd      |       |
| VDOTEH B | ABUYO |

Appendix 60

| PURCHASE RE | OUEST |
|-------------|-------|
|-------------|-------|

| Office/Section :  |                            | PR No.: 2023-1 0-0694   | Date:                        |                |   |  |
|-------------------|----------------------------|---|------------------------------|----------------|---|--|
|                   |                            | Responsibility Center Code OMCC-DRI                               | x 694                        |                |   |  |
| OMCC-DI<br>Stock/ |                            | <u>^</u>  | 2011                         | 24-Oct-23      |   |  |
| Property No.      | Unit                       | Item Description  | Quantity                     | Unit Cost      | Total Cost                                |  |
|                   | pax                        | December 4-5,2023 (WFP DRR-004)                                   | 16                           | 4,400.00       | - 70,400.00                               |  |
|                   | P                          | ,                           |                              | .,             | -   |  |
|                   |                            | HOTEL ACCOMODATION (2 DAYS/ 1 NIGHT                               | 7                            |                | <i></i>                                   |  |
|                   |                            | Twin Sharing  |                              |                | -   |  |
|                   |                            | Triple Sharing  |                              |                |   |  |
|                   |                            | Quadruple Sharing   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            | Meals:  |                              |                |   |  |
|                   | I                          | Day 1 - AM Snacks, Lunch, PM Snacks, Dinner                       |                              | ┠─────┤        |   |  |
|                   |                            | Day 2 - Breakfast, AM Snacks, Lunch, PM Snack                     | 5                            |                |   |  |
|                   |                            | nothing follows   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   | ing and strange of a strange |                |   |  |
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|                   |                            |   |                              |                |   |  |
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|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            | FUNDS AVAILABLE:  |                              |                |   |  |
|                   |                            |   |                              |                | - Ul ma petrover                          |  |
|                   |                            | Sgd   |                              |                |   |  |
|                   |                            | LAARNI D. MAGLAQUI, MBA   | a dalam na salat shaha sa    |                | ng atas higi a sayang                     |  |
|                   |                            | Financial Management Officer                                      |                              |                |   |  |
|                   |                            |   |                              |                | 1550 PASTALIO - PART - 101                |  |
|                   |                            |   |                              |                | Provide the American State of the America |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
|                   |                            |   |                              |                |   |  |
| Durpose           |                            |   |                              | Total          | 70,400.00                                 |  |
|                   |                            | commodation for the Participants of DRF<br>will due to above ABC) | RM-H Perform                 | nance Implem   | entation                                  |  |
|                   | Requested by: Approved by: |   |                              |                |   |  |
| Signature :       |                            | gd  | Sgd                          |                |   |  |
| Printed Name :    | RUB                        | Y LYNDA T. REYES, MD, MHM, MBA                                    | MARIA LOUR                   | DES L. EVANGEL | ISTA, MD, FPPA                            |  |
| Designation :     |                            | DRRM-H Manager  | Medical Center Chief II      |                |   |  |