



PHILIPPINE INTERNATIONAL TRADING CORPORATION

5/F NDC Building, 116 Tordesillas Street, Salcedo Village, Makati City

Request for Quotation RFQ Reference No. GPG-EP-2021-029 (EMERGENCY PROCUREMENT)

SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR FOR THE UNIVERSITY OF THE PHILIPPINES (MANILA) - PHILIPPINE GENERAL HOSPITAL (UPM-PGH) DEPARTMENT OF NEUROSCIENCES

The Philippine International Trading Corporation (PITC) and the University of the Philippine (Manila) – Philippine General Hospital (UPM-PGH) intend to apply the sum of PESOS: ONE MILLION THREE HUNDRED THOUSAND & 00/100 ONLY (Php 1,300,000.00) being the Approved Budget for the Contract (ABC) to payment under the contract for the SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR FOR THE OF THE UNIVERSITY OF THE PHILIPPINES (MANILA) - PHILIPPINE GENERAL HOSPITAL (UPM-PGH) DEPARTMENT OF NEUROSCIENCES, more particularly described as follows:

Item Description	Quantity	Approved Budget for the Contract (ABC) (P)
Aluminum Alloy Head Holder with Swivel Adaptor	1 Unit	1,300,000.00

NOTE:

Bids received in excess of the ABC shall be automatically rejected.

In view of this, may we request Suppliers to submit quotation with the following requirements, terms and conditions for compliance.

For submission:

1. Minimum Eligibility Requirements:

- a. Valid and current Certificate of PhilGEPS Registration (Platinum Membership)
- b. DTI or SEC Registration;
- c. Business / Mayor's Permit for issued by the city or municipality where the principal place of business of the prospective supplier is located OR the equivalent document for Exclusive Economic Zones and Areas;

In cases recently expired Mayor's/ Business permits, said permit shall be submitted together with the official receipt for as proof that the bidder has applied for renewal within the period prescribed by the concerned local government unit, **provided that the renewed permit shall be submitted prior to payment;**

- d. Valid and current Tax Clearance per Executive Order 398 and Revenue Memorandum Order No. 46-2018;
- e. Copy of Audited Financial Statements for 2019 and 2018 (in comparative form or separate reports). The following reports **must be stamped "received"** by the BIR:
 - (a) Independent Auditor's Report;
 - (b) Balance Sheet (Statement of Financial Position); and
 - (c) Income Statement (Statement of Comprehensive Income).



2. Technical Requirements:

a. Completely filled out PITC Technical Documents:

ANNEX	ITEM DESCRIPTION
ANNEX I	Technical Quotation Form
ANNEX I-A	Terms of Reference for Aluminum Alloy Head Holder with Swivel Adaptor

b. Brochures or Technical Data Sheet or equivalent document for the item being bid. Internet downloads may be included to supplement the information contained in the original brochures.

- The documents will be evaluated to ensure compliance with the required technical specifications

c. **For Philippine Eligible Local First Tier Distributors:** Copy of Valid and Current Certificate of Distributorship (as First Tier Distributor) issued by the principal manufacturer authorizing the bidder to sell/distribute the items subject of this bidding.

The Certificate MUST INDICATE/INCLUDE the following:

- a) That the manufacturer has been in the business manufacturing surgical instruments for ten (10) years;
- b) That the principal and the local distributor must have been in the business partnership for the past five (5) years;
- c) that service engineers are factory trained on service and repair

d. Omnibus Sworn Statement (Revised¹), Annex II;

3. Financial Requirements:

- a. Completely filled out PITC Financial Quotation Form: **Annex III** - Supplier's price proposal must not be more than the ceiling price per item and must be inclusive of VAT;
- b. Price must be valid for One Hundred Twenty (120) calendar days upon submission of quotation.

Requirement if Awarded the contract

- Delivery Period: Sixty (60) calendar days after receipt of Notice to Proceed
- Delivery Place: Equipment Section, Property and Supply Division, Philippine General Hospital, Taft Avenue, Manila

Should your company be interested, you may submit your **quotation** on or before **Monday, 18 January 2021 STRICTLY NOT LATER THAN 5:00 PM** thru the following email address:

- erika.guycoa@pitc.gov.ph
- erika.guycoa@pitc1973.onmicrosoft.com
- jinky.apolinar@pitc.gov.ph
- jinky.apolinar@pitc1973.onmicrosoft.com

Note: Maximum size of email with attachment is six (6) MB only. You may email your quotation in parts if your attachment is more than six (6) MB.

Thank you.




CHRISTABELLE P. EBRIEGA
Vice President
Government Procurement Group

After having carefully read and accepted the Terms and Conditions,
I/we submit our quotation for the SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW
ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR FOR THE UNIVERSITY OF
THE PHILIPPINES (MANILA) - PHILIPPINE GENERAL HOSPITAL (UPM-PGH)
DEPARTMENT OF NEUROSCIENCES

Name of Company (in print)

Signature of Company Authorized Representative

Name & Designation of Company Authorized Representative (in print)

Contact Details (Tel. No., Fax No. & Email Address)

Date



PLEASE USE THIS BID FORM. DO NOT RETYPE OR ALTER.

Annex I (Page 1 of 3)

**PHILIPPINE INTERNATIONAL TRADING CORPORATION
TECHNICAL QUOTATION FORM**

**SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR FOR THE UNIVERSITY OF THE PHILIPPINES (MANILA) - PHILIPPINE GENERAL HOSPITAL (UPM-PGH) DEPARTMENT OF NEUROSCIENCES
RFQ Reference No. GPG-EP-2021-029
EMERGENCY PROCUREMENT**

PHILIPPINEINTERNATIONALTRADINGCORPORATIONPHILIPPINEINTERNATIONALTRADINGCORPORATIONPHILIPPINEINTERNATIONALTRADINGCORPORATION

INSTRUCTIONS TO THE SUPPLIER: Indicate "COMPLY" if Supplier's Statement of Compliance meets the technical specifications as indicated. Do not leave any blank. A "YES" or "NO" entry will not be accepted. Failure to comply will result to rejection of the Supplier's proposal.

Line No.	PROJECT REQUIREMENTS	Supplier's Statement of Compliance
1)	ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR (attached as Annex I-A) Consisting of the following components: A. Adjustable Base Unit B. Swivel Adaptor C. Skull Clamp D. OR Table Adaptor	

ITEM DESCRIPTION	Please Specify the Brand Being Offered:
ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR	

I/We, the undersigned Manufacturer/Supplier, having examined the Technical Documents for this project hereby OFFER to (supply/deliver/perform) the herein described items.
 I/We undertake, if our proposal is accepted, to deliver the items in accordance with the terms and conditions contained in the Request for Quotation.
 Until a formal Contract is prepared and signed, this proposal is binding on us.

Name of Company (in print)

Signature of Company Authorized Representative

Name & Designation (in print)

Date



PLEASE USE THIS BID FORM. DO NOT RETYPE OR ALTER.

Annex I (Page 2 of 3)

PHILIPPINE INTERNATIONAL TRADING CORPORATION
TECHNICAL QUOTATION FORM
SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER
WITH SWIVEL ADAPTOR FOR THE UNIVERSITY OF THE PHILIPPINES (MANILA) - PHILIPPINE
GENERAL HOSPITAL (UPM-PGH) DEPARTMENT OF NEUROSCIENCES
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Line No.	OTHER REQUIREMENTS	Supplier's Statement of Compliance																
1)	Supplier must have supplied the same brand of equipment being offered to at least three (3) Tertiary Hospitals in Metro Manila.																	
	Please list down the name and contact details of three (3) Tertiary hospitals, including the S.I. No issued to them:																	
	<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 35%;">Name & Address</th> <th style="width: 20%;">Contact Numbers</th> <th style="width: 20%;">E-mail Address</th> <th style="width: 25%;">Sales Invoice (S.I.) No. Issued</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.</td> <td></td> <td></td> <td></td> </tr> <tr> <td>3.</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Name & Address	Contact Numbers	E-mail Address	Sales Invoice (S.I.) No. Issued	1.				2.				3.			
	Name & Address		Contact Numbers	E-mail Address	Sales Invoice (S.I.) No. Issued													
	1.																	
2.																		
3.																		
2)	The manufacturer of the item being offered must have a valid and current ISO Certification.																	
	Please specify the details of the ISO Certificate:																	
	<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 40%;">Name of Third-party Issuing Agency</th> <th style="width: 30%;">ISO Number</th> <th style="width: 30%;">Validity Period</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Name of Third-party Issuing Agency	ISO Number	Validity Period													
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3)	The manufacturer of the item being offered must have existing branch office, sales office and/ or distributor’s office in the following areas:																	
	a. Any country in Western Europe																	
	b. US/ Canada																	
	c. Japan																	
4)	Bidder’s must have valid and current License to Operate (LTO) as a Medical Device Importer / Distributor issued by the Philippine Food and Drug Administration (PFDA). Provided, that the application for renewal was made timely as per PFDA Circular No. 2011-004																	
	In case of expired LTO, the following copies shall be submitted: (i) Expired LTO (ii) Application for renewal; and Official Receipt as proof of payment of renewal of LTO																	
5)	Bidder warrants that it has Service Center/s for the items being offered within Metro Manila.																	
6)	Bidder certifies that at least one (1) service engineer is available locally to provide quick on-site support.																	

I/We, the undersigned Manufacturer/Supplier, having examined the Technical Documents for this project hereby OFFER to (supply/deliver/perform) the herein described items.

I/We undertake, if our proposal is accepted, to deliver the items in accordance with the terms and conditions contained in the Request for Quotation. Until a formal Contract is prepared and signed, this proposal is binding on us.

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Signature of Company Authorized Representative

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TECHNICAL QUOTATION FORM

SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR FOR THE UNIVERSITY OF THE PHILIPPINES (MANILA) - PHILIPPINE GENERAL HOSPITAL (UPM-PGH) DEPARTMENT OF NEUROSCIENCES
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INSTRUCTIONS TO THE SUPPLIER: Indicate "COMPLY" if Supplier's Statement of Compliance meets the technical specifications as indicated. Do not leave any blank. A "YES" or "NO" entry will not be accepted. Failure to comply will result to rejection of the Supplier's proposal.

Line No.	REQUIREMENTS IF AWARDED THE CONTRACT	Supplier's Statement of Compliance
1)	Delivery Period: Sixty (60) calendar days after receipt of Notice to Proceed	
2)	Delivery Place: Equipment Section, Property and Supply Division, Philippine General Hospital, Taft Avenue, Manila	
3)	Delivery Conditions: <ul style="list-style-type: none"> All deliveries must be done in the presence of Inspection Team consisting of one (1) PITC representative and one (1) authorized representative of the UPM-PGH During delivery, the Supplier shall be responsible in unloading the items from the container/truck to the designated delivery center. In the absence of materials handling equipment at the site, the Supplier at his expense shall provide the necessary equipment such as but not limited to: forklifts, hand pallet truck, etc. All costs during the delivery, handling, including transportation and other related expenses shall be borne by the Supplier. 	
4)	Warranty period/ Coverage of Warranty: <ul style="list-style-type: none"> At least Two (2) years on parts and service; Free Preventive Maintenance during the warranty period expires Warranty shall commence from the date of acceptance by the end user after installation, testing and commissioning.	
5)	Manuals: Bidder must provide original and hard copy of Operator's Manual in English Language upon delivery.	
6)	Acceptance Parameters: Visual and functional inspection and testing	
7)	Product Orientation/ Training: Undertaking to provide product orientation for end users	

I/We, the undersigned Manufacturer/Supplier, having examined the Technical Documents for this project hereby OFFER to (supply/deliver/perform) the herein described items.
I/We undertake, if our proposal is accepted, to deliver the items in accordance with the terms and conditions contained in the Request for Quotation.
Until a formal Contract is prepared and signed, this proposal is binding on us.

Name of Company (in print)

Signature of Company Authorized Representative

Name & Designation (in print)

Date



TERMS OF REFERENCE

PGH Form No. Q-240005



PHILIPPINE GENERAL HOSPITAL
The National University Hospital
 University of the Philippines Manila
 Taft Avenue, Manila
 554-8400
PHIC – Accredited Health Care Provider
ISO 9001:2008 Certified



1.	Name of Project: (as applicable) Supply and Delivery of One (Unit) Aluminum Alloy Head Holder with Swivel Adaptor for the Department of Neurosciences (As of November 26, 2020)
Requirements (which may be included in the Technical Bid Form) (TOR may be attached to the bidding documents for bidder's signature for Conformance)	
2.	Components A. Adjustable Base Unit B. Swivel Adaptor C. Skull Clamp D. OR Table Adaptor E. Consumables: a. Pediatric skull pins b. Adult skull pins
3.	Scope of Work: Supply and Delivery Only
4.	Technical Specifications: A. Adjustable Base Unit 1. Material: Aluminum Alloy 2. Weight: Must not be more than 3110 grams 3. Mounts to operating room table neuro-interface or neuro-adaptor 4. Width between rods adjustable from minimum of 100 mm/3.9 inches to a maximum of 245 mm/9.6 inches 5. Detachable transitional member for easy cleaning. B. Swivel Adaptor 1. Material: Aluminum Alloy 2. Weight: Must not exceed 480 grams 3. Must be rotatable by 360 degrees C. Skull Clamp 1. Material: Aluminum Alloy and Stainless Steel 2. Weight: Must not exceed 1700 grams 3. Pin rigid cranial fixation 4. Provides tactile feedback when locking dual-pin rocker arm 5. Must have at least two (2) pressure scales: i. In Neutons: 90 N, 180N, 270N, 360N) ii. In lbs (20 lbs, 40 lbs, 60 lbs, 80 lbs) 6. Accessory attachment rail of 11.5cm long and 2.5 cm wide 7. Must be suitable for supine, prone, lateral and sitting positions 8. Head room diameter range of 70 mm to 220mm 9. Maximum load: At least 12.5 kg (27.5 lbs) 10. Stainless steel starburst on both sides of the accessory rail for direct and secure attachment of movement neuronavigation devices 11. No play between archholder and skull clamp base when locked D. OR Table adaptor 1. Material: Aluminum 2. Weight: Must not exceed 4700 grams 3. Mounts to OR table side rail 4. Adjustable in width to fit various OR table minimum 460 mm/18.1 inches to maximum 670 mm/26.4

Conforme:	Date
Name & Signature of Authorized Representative	
Bidder's Company Name	Designation



TERMS OF REFERENCE

PGH Form No. O-240005



PHILIPPINE GENERAL HOSPITAL
The National University Hospital
University of the Philippines Manila
Taft Avenue, Manila
554-8400
PHIC - Accredited Health Care Provider
ISO 9001:2008 Certified



Table with 9 rows containing technical specifications and requirements for consumables and contract award conditions.

Requested by:

Dioquino

CARISSA PAZ DIOQUINO-MALIGASO, MD
Chair Department of Neurosciences

Prepared by:

RACEL IRENEO LUIS C. QUEROL, MD
TWG Representatives/s

Recommended by:

MA. MARGARITA LAT-LUNA
Provisional Member

Approved by:

GERARDO D. LEGASPI, MD
Director

Vertical signature box with labels: Conformer, Bidder's Company Name, Name & Signature of Authorized Representative, Designation, Date.



Omnibus Sworn Statement (Revised¹)

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

AFFIDAVIT

I, [Name of Affiant], of legal age, [Civil Status], [Nationality], and residing at [Address of Affiant], after having been duly sworn in accordance with law, do hereby depose and state that:

1. *[Select one, delete the other:]*

[If a sole proprietorship:] I am the sole proprietor or authorized representative of [Name of Bidder] with office address at [address of Bidder];

[If a partnership, corporation, cooperative, or joint venture:] I am the duly authorized and designated representative of [Name of Bidder] with office address at [address of Bidder];

2. *[Select one, delete the other:]*

[If a sole proprietorship:] As the owner and sole proprietor, or authorized representative of [Name of Bidder], I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for [Name of the Project] of the [Name of the Procuring Entity], as shown in the attached duly notarized Special Power of Attorney;

[If a partnership, corporation, cooperative, or joint venture:] I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for [Name of the Project] of the [Name of the Procuring Entity], as shown in the attached [state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable)];

3. [Name of Bidder] is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board, **by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting;**

4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;

5. [Name of Bidder] is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

¹ Pursuant to GPPB Resolution No. 16-2020 dated 16 September 2020

6. *[Select one, delete the rest:]*

[If a sole proprietorship:] The owner or sole proprietor is not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;



Omnibus Sworn Statement (Revised¹)

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

AFFIDAVIT

I, [Name of Affiant], of legal age, [Civil Status], [Nationality], and residing at [Address of Affiant], after having been duly sworn in accordance with law, do hereby depose and state that:

1. *[Select one, delete the other:]*

[If a sole proprietorship:] I am the sole proprietor or authorized representative of [Name of Bidder] with office address at [address of Bidder];

[If a partnership, corporation, cooperative, or joint venture:] I am the duly authorized and designated representative of [Name of Bidder] with office address at [address of Bidder];

2. *[Select one, delete the other:]*

[If a sole proprietorship:] As the owner and sole proprietor, or authorized representative of [Name of Bidder], I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for [Name of the Project] of the [Name of the Procuring Entity], as shown in the attached duly notarized Special Power of Attorney;

[If a partnership, corporation, cooperative, or joint venture:] I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for [Name of the Project] of the [Name of the Procuring Entity], as shown in the attached [state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable)];

3. [Name of Bidder] is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board, **by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting;**

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¹ Pursuant to GPPB Resolution No. 16-2020 dated 16 September 2020

6. *[Select one, delete the rest:]*

[If a sole proprietorship:] The owner or sole proprietor is not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;



[If a partnership or cooperative:] None of the officers and members of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

[If a corporation or joint venture:] None of the officers, directors, and controlling stockholders of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. *[Name of Bidder]* complies with existing labor laws and standards; and
8. *[Name of Bidder]* is aware of and has undertaken the responsibilities as a Bidder in compliance with the Philippine Bidding Documents, which includes:
 - a. Carefully examining all of the Bidding Documents;
 - b. Acknowledging all conditions, local or otherwise, affecting the implementation of the Contract;
 - c. Making an estimate of the facilities available and needed for the contract to be bid, if any; and
 - d. Inquiring or securing Supplemental/Bid Bulletin(s) issued for the *[Name of the Project]*.
9. *[Name of Bidder]* did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
10. **In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.**

IN WITNESS WHEREOF, I have hereunto set my hand this ___ day of ___, 20__ at _____, Philippines.

[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE]
[Insert signatory's legal capacity]
 Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____ at _____, Philippines, by the affiant/s himself/herself/themselves whom I was able to personally identify through his/her/their *[insert type of valid government identification card used]*, which he/she/they has/have presented to me.

Witness my hand and seal this ___ day of *[month]* *[year]*.



NAME OF NOTARY PUBLIC

Serial No. of Commission _____

Notary Public for _____ until _____

Roll of Attorneys No. _____

PTR No. _____ *[date issued], [place of issue]*

IBP No. _____ *[date issued], [place of issue]*

Doc No. _____

Page No. _____

Book No. _____

Series of _____



PLEASE USE THIS BID FORM. DO NOT RETYPE OR ALTER.

Annex III

**PHILIPPINE INTERNATIONAL TRADING CORPORATION
FINANCIAL QUOTATION FORM**

**SUPPLY AND DELIVERY OF ONE (1) UNIT BRAND NEW ALUMINUM ALLOY HEAD HOLDER WITH SWIVEL ADAPTOR FOR THE UNIVERSITY OF THE PHILIPPINES (MANILA) - PHILIPPINE GENERAL HOSPITAL (UPM-PGH) DEPARTMENT OF NEUROSCIENCES
RFQ Reference No. GPG-EP-2021-029
EMERGENCY PROCUREMENT
PRICE MUST BE INCLUSIVE OF VAT**

PHILIPPINEINTERNATIONALTRADINGCORPORATIONPHILIPPINEINTERNATIONALTRADINGCORPORATIONPHILIPPINEINTERNATIONALTRADINGCORPORATION

NOTE: Supplier's price proposal/quotation must not exceed the ABC/Ceiling Price per Item. The Supplier shall shoulder all transportation costs and bears all risk until the goods have been delivered to the site.

Description	Quantity	ABC (PhP)	Supplier's Price Proposal (PhP)
Aluminum Alloy Head Holder with Swivel Adaptor	1 Unit	1,300,000.00	

Amount in Words:

Note:

- I. Price must be valid for One Hundred Twenty (120) days upon submission of quotation;
- II. The Supplier shall shoulder all transportation costs and bears all risk until the goods have been delivered to the site. If delivery is outside Metro Manila, all expenses (airfare, hotel accommodation, per diem, etc.) relative to delivery shall be borne by the Supplier.
- III. Payment to Supplier of the Contract Price, net of applicable withholding tax shall be made within fifteen (15) days after full delivery, and submission of the required documents as follows:
 1. Original and duplicate **BIR VAT registered Supplier's Invoice issued under the name of the UPM-PGH** indicating **UPM-PGH TIN: 000-864-006-018**. Entries must be typewritten, or computer printed and **must be duly acknowledged and received by UPM-PGH's authorized representative**;
 2. **Original and duplicate Delivery Receipt issued under the name of the UPM-PGH** duly acknowledged and received by **UPM-PGH's** authorized representative and countersigned by PITC QAIT representative; and
 3. Original Joint Certificate of Acceptance issued by authorized representatives of **UPM-PGH** and PITC.
 4. Beneficiary Certificate issued by **UPM-PGH** that the following documents were submitted/complied by the supplier:
 - a) Certification from at least three (3) Tertiary Hospitals in the Philippines that they have been supplied the same brand of equipment being offered by the supplier. Sales Invoice from at least three (3) tertiary hospitals in Metro Manila may also be presented in lieu of the Hospital Certification.
 - b) Valid & current ISO Certificate in the name of the manufacturer;
 - c) Valid & current License to Operate (LTO) issued by Philippine Food and Drug Administration) (PFDA);
 - d) List of Authorized Service Center/s in Metro Manila (with available spare parts, indicating address, telephone & fax numbers, email address and contact person);
 - e) Certificate by the Supplier that at least one (1) service engineer is available locally to provide quick on-site support.
 5. As one of documentary requirements for payment (as applicable), submit certified true copies of pertinent tax receipts and duties paid on the imported parts/equipment pursuant to COA Memo No. 90-684 dated Dec. 5, 1990/Administrative Order No. 200 dated November 20, 1990. For locally purchased materials, the BIR registered sales invoice of the seller is acceptable.

SUPPLIER'S UNDERTAKING

I/We, the undersigned Manufacturer/Supplier, having examined the Technical Documents for this project hereby OFFER to (supply/deliver/perform) the herein described items.

I/We undertake, if our proposal is accepted, to deliver the items in accordance with the terms and conditions contained in the Request for Quotation. Until a formal Contract is prepared and signed, this proposal is binding on us.

Name of Company (in print)

Signature of Company Authorized Representative

Name & Designation (In print)

Date