



DEPARTMENT OF ENVIRONMENT AND NATURAL RESOURCES
KAGAWARAN NG KAPALIGIRAN AT LIKAS NA YAMAN



REQUEST FOR QUOTATION

P.R. NO:	2024-08-2196	MODE OF PROCUREMENT:	SHOPPING
P.R. DATE:	20 AUGUST 2024	REF. NO.:	RFQ-2024-290
END-USER:	TDD-EMDS	DATE PREPARED:	August 29, 2024
PRN:	_____	CLOSING DATE/TIME:	September 2, 2024 10:00 AM

- The DENR-Central Office, through its Bids and Awards Committee for Regular Operations, invites eligible bidder/s to submit duly signed proposal/quotation not later than the closing date and time for the procurement project stated below:

DESCRIPTION	QTY	UNIT	TOTAL ABC (VAT INCLUSIVE)
<i>Supply and Delivery of Various Drugs / Medicine Supplies</i>	1	lot	10,015.00

- Proposal/quotation received in excess of the ABC shall automatically be rejected.
- Interested bidder/s must submit the following documents:

A. ELIGIBILITY DOCUMENTS	
a.	Valid and current Certificate of PhilGEPS Registration (Platinum Membership) (all pages) in accordance with Section 8.5.2 of the IRR (pursuant to GPPB Resolution No. 15-2021, dated 14 October 2021); OR PhilGEPS Registration Number
b.	Valid and Current Mayor's/Business Permit for CY 2024 OR application for Business/Mayor's Permit with attached Official Receipt (OR) of payment of Licensing and Regulatory fees and 2023 Business/Mayor's permit.
c.	Special Power of Attorney/Board Resolution/Authorization as authorize representative valid for six (6) months (if applicable)
Note: Bidder/s who previously submitted updated Eligibility Documents are no longer required to resubmit.	
B. TECHNICAL AND FINANCIAL DOCUMENTS	
d.	Completely filled out and duly signed Technical Proposal Form and Financial Quotation Form (Annex "A")
e.	Valid and current Certificate of Product Registration (CPR) for the brand being offered issued by Food and Drug Administration (FDA)
f.	Certification of Good Manufacturing practice issued by FDA
g.	Valid and current Certificate of Distributorship/Dealership/Reseller ship of the brand being offered, issued by the principal or manufacturer of the product (if the Bidder is not the manufacturer). If not issued by the manufacturer, must also submit certification/document linking bidder to the manufacturer.

Failure to submit all documents as required above shall be automatically disqualified.

- Price must be inclusive of VAT and must be valid for Sixty (60) calendar days upon submission of proposal/quotation.
- Award of Contract shall be made to the lowest calculated and responsive quotation which complies with the minimum technical specifications and other terms and conditions stated herein.
- Refusal to sign and accept the Award or enter into contract without justifiable reason may be grounds for imposition of administrative sanctions under Rule XXIII of the Revised IRR of RA 9184.
- Open proposal/quotation may be submitted at Procurement Management Section-Property and Supply Management Division (PrMS-PSMD), Basement, DENR-Main Building and/or thru e-mail address

ampbac.co@denr.gov.ph and/or fax number (02) 8926-2675. For further inquiries, you may coordinate with Ms. Dianne G. Ibias/Mr. Lamberto S. Ramos at the same contact details.

8. If thru email, kindly indicate in the subject ATTENTION: JELYN STA. ANA - RFQ-2024-290.
9. DENR reserves the right to reject any and all proposals, declare failure, or not award the contract at any time in accordance with Section 41 of RA 9184 and its IRR without thereby incurring liability to the affected supplier.


DIANNE G. IBIAS
Chief, Procurement Mgt. Section-PSMD &
Head, BAC Secretariat *gmi*

Technical Proposal Form

Item No.	Description / Technical Specifications	Qty	Brand/Model No. of the item being offered:
Supply and Delivery of Various Drugs / Medicine Supplies		1 lot	
1.	Paracetamol 500mg	50 tabs	
2.	Erceflora Oral Suspension	1 box	
3.	Carboceistine 500mg Capsule	50 caps	
4.	Cetirizine DiHCl 10mg	50 tabs	
5.	Gaviscon Double Action	2 caps	
6.	Loperamide HCl 2mg	20 caps	
7.	Ibuprofen	50 caps	
8.	Oral Rehydration Salts	10 sachets	
9.	Ranitidine HCl 150mg	20 tabs	
10.	Salbutamol Sulfate 1mg 2.5ml 1 Nebule Solution	5 nebs	
11.	Loratadine 10mg	20 tabs	
12.	Meclizine HCl (Bonamine) 25mg chewable	20 tabs	
13.	Indomethacin (Vi-gel) 10% cream 15gm	1 tube	
14.	Hydrocortisone 1% cream 10gm	1 tube	
15.	Burn Ointment (Nitrofurazone), 15g	2 tubes	
16.	Disposable gloves (medium)	4 boxes	
17.	Band aid washproof	2 boxes	
18.	Antiseptic Povidone iodine prep pads	1 box	
19.	Cotton Balls (300pcs/pack)	1 pack	

Project Requirements/Terms and Conditions:

- Delivery/completion** period: within fifteen (15) working days from receipt of Purchase Order.
- Delivery Site:** Supply Management Section, Basement, DENR Main Building, Visayas Ave., Diliman, Quezon City
- Price quotation/s, to be denominated in Philippine Peso shall include all taxes, duties and/or levies payable subjected to deduction of applicable Government Tax
- DENR shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- Replacement of Defective Items: Within ten (10) Calendar Days upon receipt of Notice of Defects from DENR.
- Warranty: Three (3) months in case of Expendable Supplies and One (1) Year in the case of Non-expendable Supplies from issuance of Certificate of Inspection and Acceptance. Warranty Certificate must be submitted during delivery.
- Amendment to Order may be issued subject to the conditions set forth under Annex D of the 2016 Revised IRR of RA 9184.
- Payment shall be made in accordance with the Government Terms
- Liquidated Damages (LD) equivalent to one tenth of one percent (0.1%) of the value of contract not delivered within the prescribed period shall be imposed per day of delay. The DENR may rescind the Contract once the cumulative amount of LD reaches 10% of the amount of the Contract, without prejudice to other courses of action and remedies open to it.
- Bidder has no overdue deliveries or unperformed services intended for DENR-CO.**

**FINANCIAL QUOTATION FORM
(PRICE MUST BE VAT INCLUSIVE)**

Item No.	DESCRIPTION	QTY	TOTAL ABC (P)		BIDDER'S PRICE QUOTATION (P)	
			Unit Price	Total Price	Unit Price	Total Price
<i>Supply and Delivery of Various Drugs / Medicine Supplies</i>		1 lot				
1.	Paracetamol 500mg	50 tabs	10.00	500.00		
2.	Erceflora Oral Suspension	1 box	390.00	390.00		
3.	Carboceistine 500mg Capsule	50 caps	10.00	500.00		
4.	Cetirizine DiHCl 10mg	50 tabs	21.00	1,050.00		
5.	Gaviscon Double Action	2 caps	720.00	1,440.00		
6.	Loperamide HCl 2mg	20 caps	15.00	300.00		
7.	Ibuprofen	50 caps	20.00	1,000.00		
8.	Oral Rehydration Salts	10 sachets	25.00	250.00		
9.	Ranitidine HCl 150mg	20 tabs	15.00	300.00		
10.	Salbutamol Sulfate 1mg 2.5ml 1 Nebule Solution	5 nebs	35.00	175.00		
11.	Loratadine 10mg	20 tabs	24.00	480.00		
12.	Meclizine HCl (Bonamine) 25mg chewable	20 tabs	14.00	280.00		
13.	Indomethacin (Vi-gel) 10% cream 15gm	1 tube	350.00	350.00		
14.	Hydrocortisone 1% cream 10gm	1 tube	300.00	300.00		
15.	Burn Ointment (Nitrofurazone), 15g	2 tubes	300.00	600.00		
16.	Disposable gloves (medium)	4 boxes	300.00	1,200.00		
17.	Band aid washproof	2 boxes	150.00	300.00		
18.	Antiseptic Povidone iodine prep pads	1 box	450.00	450.00		
19.	Cotton Balls (300pcs/pack)	1 pack	150.00	150.00		
				Grand Total: 10,015.00		

Note: Financial offer must not exceed the ABC per line items.

BIDDER'S UNDERTAKING

I/We, the undersigned Supplier, after having examined the Technical Specifications/ Project Requirements, hereby OFFER to supply/deliver/perform the above-described items.

I/We undertake, if our proposal is accepted, to deliver the items/services in accordance with the terms and conditions contained in the Request for Quotation.

Until a formal PO/ Contract is prepared and signed, this quotation is binding on us.

<p>NAME OF COMPANY (IN PRINT) _____</p> <p>ADDRESS: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>SIGNATURE OVER PRINTED NAME OF THE AUTHORIZED REPRESENTATIVE _____</p> <p>Designation: _____</p> <p>Date: _____</p> <p>Email Address: _____</p> <p>Telefax No.: _____</p> <p>Mobile Number: _____</p>
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