



Republic of the Philippines
DEPARTMENT OF THE INTERIOR AND LOCAL GOVERNMENT
BUREAU OF JAIL MANAGEMENT AND PENOLOGY NATIONAL HEADQUARTERS

144 Mindanao Avenue, Quezon City

Trunk lines: (+632)927-6383 •, 927-5505

Email Address: chief@bjmp.gov.ph Website: www.bjmp.gov.ph

REQUEST FOR QUOTATION

Negotiated 53.2 Emergency Cases

The Bureau of Jail Management and Penology — National Headquarters (BJMP-NHQ), through its Bids and Awards Committee, intends to procure **Supply and Delivery of Various Medicines** which will be undertaken in accordance with the Section 53.2 Negotiated Procurement – Emergency Cases of 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184.

Name of the Project	Supply and Delivery of Various Medicines
ABC	One Hundred Ninety-Seven Thousand Four Hundred Pesos (Php 197,400.00)
Specifications	See Annex "A"
Delivery Location	BJMP National Headquarters, 144 Mindanao Avenue Project 8, Quezon City
Delivery Date	Three (3) calendar days upon receipt of Purchase Order

Please quote your best offer for the item/s described herein, subject to the Terms and Conditions provided at the last page of this RFQ. Submit our quotation duly signed by you or your authorized representative not later than 1:8 JAN 2022 at 5:00 PM.

Interested suppliers are required to submit the following documents.

- Mayor's Permit;
- PhilGEPS Registration Number (Please indicate in the space provided in Annex "A"); and
- Omnibus Sworn Statement together with any documents to prove that the signatory of the quotation is authorized representative of the company or photocopy of ID bearing the picture/signature of the representative issued by the company (to be submitted before issuance of Notice of Award).

Quotations may be submitted manually or through email at the address and contact numbers indicated below.

For further information, please refer to:

JSINSP ARTURO R ESPOS JR


Directorate for Logistics

BJMP National Headquarters,

144 Mindanao Avenue, Project 8, Quezon City

Telephone Number: 927-6383 local 202

Email Address: bac.bjmpnhq@gmail.com


DENNIS U ROCAMORA, CESE
Jail Chief Superintendent
Deputy Chief for Operations
of the Jail Bureau
Chairperson, BJMP-NHQ BAC

TERMS AND CONDITIONS

1. Bidders shall provide correct and accurate information required in this form.
2. Price quotation/s must be valid for a period of thirty (30) calendar days from the date of submission.
3. Price quotations shall be denominated in Philippine Peso and shall include all taxes and/or levies payable.
4. Quotation exceeding the Approved Budget for the Contract shall be rejected.
5. Award of Contract shall be made to the Lowest Quotation (for goods and infrastructure) or, the highest rated offer (for consulting service) which complies with the minimum technical specification and other terms and conditions stated therein.
6. Any interlineations, erasure or overwriting shall be valid only if they are signed or initialed by you or your authorized representative/s.
7. The item/s shall be delivered according to requirement specified in the Technical Specifications.
8. The BJMP-NHQ shall have the right to inspect and/or to test the goods to conform their conformity to the technical specifications.
9. Liquidated damages equivalent to one tenth of one percent of the value of the goods not delivered within the prescribed delivery period shall be imposed per day of delay. The BJMP-NHQ shall rescind the contract once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the contract, without prejudice to other course of action and remedies open to it.

I hereby understand and commit to comply all the above requirements in accordance with the above-stated terms and conditions.

Name and Signature of Authorized Representative: _____

Name of the Company/ Business Name : _____

Date : _____

ANNEX "A"

Name of the Company : _____
 Address : _____
 TIN Number. : _____
 *PhilGEPS Registration No. : _____
 Contact Number : _____
 Email Address : _____

INSTRUCTIONS

1. Do not alter the contents of this form in any way.
2. All the technical specifications are mandatory. Failure to comply with the specification shall be a ground for the disqualification of your quotation. Failure to follow these instructions will disqualify your entire quotation.

TECHNICAL SPECIFICATIONS

Bidders must state either "Comply" or "Not Comply" or any equivalent term in the column "Statement of Compliance" against each of the individual parameters of each "Specification". Please do not just check in the bidders "Statement of Compliance".

TECHNICAL SPECIFICATIONS	Quantity	Statement of Compliance	Remarks
Ascorbic Acid with Zinc 500mg/10mg capsules 100's/box	50		
Dichlorobenzyl Alcohol Amylmetacresol 1.2mg600mcg 8 lozenges/pouch	50		
Paracetamol Analgesic/Antipyretic500mg caplet 500's/box	20		
Ibuprofen 200mg + Paracetamol 325mg caps 100's/box	3		
Phenylephrine HCl + Chlorphenamine Maleate + Paracetamol 10mg/2mg/500mg tab 100's/box	50		
Levocetirizine+ Montelukast 10mg/5mgtab 100's/box	10		
Carbocisteine 500mg/cap 100's/box	5		
Ambroxol HCl 30mg tabs 100's/box	5		
Acetylcysteine Effervescent tablet 600mg/tab	10		
Hexetidine 0.1% Solution Oral antiseptic 60ml/bot	50		

FINANCIAL OFFER

After having carefully read and accepted the Terms and Conditions, I/we submit our quotation/s for the item/s as follows:

ABC:	One Hundred Ninety-Seven Thousand Four Hundred Pesos (Php 197,400.00)		
Particular	Unit of Measure	Quantity	Price Offer
Ascorbic Acid with Zinc 500mg/10mg capsules 100's/box	Boxes	50	
Dichlorobenzyl Alcohol Amylmetacresol 1.2mg600mcg 8 lozenges/pouch	Pouches	50	
Paracetamol Analgesic/Antipyretic500mg caplet 500's/box	Boxes	20	
Ibuprofen 200mg + Paracetamol 325mg caps 100's/box	Boxes	3	
Phenylephrine HCl + Chlorphenamine Maleate + Paracetamol 10mg/2mg/500mg tab 100's/box	Boxes	50	
Levocetirizine+ Montelukast 10mg/5mgtab 100's/box	Boxes	10	
Carbocisteine 500mg/cap 100's/box	Boxes	5	
Ambroxol HCl 30mg tabs 100's/box	Boxes	5	
Acetylcysteine Effervescent tablet 600mg/tab	Boxes	10	
Hexetidine 0.1% Solution Oral antiseptic 60ml/bot		50	

TOTAL BID AMOUNT <i>(in words and figures)</i>	
Payment Details:	
Banking Institution	: _____
Account Number	: _____
Account Name	: _____
Branch	: _____

Name and Signature of Authorized Representative : _____
Date : _____