



Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number 8635862
Procuring Entity NORTHWEST SAMAR STATE UNIVERSITY
Title Supply and Delivery of Drugs and Medicines for University Clinic - 2nd Quarter (2022-04-150)
Area of Delivery Samar

Solicitation Number:	2022-04-150	Status	Active
Terms Agreement:	Implementing Rules and Regulations	Associated Components	1
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification:	Goods	Document Request List	0
Category:	Medical Supplies and Laboratory Instrument	Date Published	02/05/2022
Approved Budget for the Contract:	PHP 80,000.00	Last Updated / Time	02/05/2022 00:00 AM
Delivery Period:	30 Day/s	Closing Date / Time	06/05/2022 09:00 AM
Client Agency:			
Contact Person:	Jhenrose Savellino Billate Procurement Staff Rueda Extension Calbayog City Samar Philippines 6710 63-55-2093122 63-55-2093122 procurement@nwssu.edu.ph		

Description

PROCUREMENT OFFICE
 Email: procurement@nwssu.edu.ph
 Contact Number: 09173178126

REQUEST FOR PRICE QUOTATION
 RFQ No. 2022-04-150
 May 2, 2022

SIR/MADAM:

Please quote your lowest price for the following items enumerated below, taking into consideration the following:

TERMS AND CONDITIONS

- The Approved Budget for the Contract (ABC) is P 80,000.00 under PR No. 2022-04-150
- Submit your quotation in a sealed envelop on or before May 6, 2022 @ 9:00 AM.
- Opening of RFQs is on May 6, 2022 @ 10:00 AM in our office.
- This procurement is PER ITEM, however, if stated in LOT, quotation shall be evaluated by lot. Any price offer that exceeds the ABC shall be disqualified.
- Price Quotation should be inclusive of the 5% Final VAT and Expanded Withholding Tax (EWT) of 1%.
- Price Quotation shall be valid within thirty (30) calendar days from the deadline of the RFQ.
- Delivery Period is within 30 calendar days and shall commence as stated in the Purchase Order. Free on site delivery.
- If awarded the contract, processing and payment shall be made after the complete delivery of services/Supplies and final acceptance.
- Refusal to accept an award may be ground for imposition of administrative sanctions under Rule XXII of the revised IRR of RA 9184. Please observe the Revised IRR of RA 9184.
- FOB-NORTHWEST SAMAR STATE UNIVERSITY-Main located at Rueda St, Calbayog City, Samar.
- The procuring entity may terminate the contract, in whole or in part, at anytime for unsatisfactory service.
- Request for quotation should be returned within 5 days from receipt hereof.

Item No. Qty. Unit Articles/Description Supplier's Offer (Complete Specifications and Brand Name) Unit Price:

- 60 pc Amlodipine (Norvasc), 10mg tab
- 1 box/es Amlodipine 5mg, (100/box)
- 3 box/es Losartan 100mg., tablet (30/box)
- 25 pc/s Captopril, 25mg
- 2 box/es Co-amoxiclav 375mg., @100/box
- 3 box/es Cefalexin 500mg, (100/box)
- 1 box/es Cetirizine 10mg, (100/box)
- 2 box/es Cloxacillin 500mg, (100/box)
- 1 box/es Hemostan Tranexamic Acid 500mg
- 1 box/es Hyoscine N-Butylbromide 10mg
- 1 box/es Famotidine, Calcium Carbonate, Magnesium Hydroxide, 10mg/800mg/165mg/178mg/30mg (100/box)
- 2 box/es Loperamide 2mg
- 2 box/es Loratadine, 10mg
- 1 box/es Meloxicam, 15mg (100/box)
- 3 box/es Phenylpropranolamine HCl Chlorphenamine Maleate Paracetamol (100/box)
- 1 box/es Ofloxacin 400 mg Pharex Tablet (100/box)
- 1 box/es Omeprazole, 20mg
- 100 box/es Betahistine 16mg tab
- 2 box/es Carbocisteine 500mg (100/box) - Generic
- 2 box/es Carbocisteine 500mg - Non-generic (100/box)
- 3 pc/s Eye drops for Red Eyes (Tetrahydrozoline HCl)
- 3 pc/s Mupirocin Ointment
- 1 pc/s Burn Ointment
- 2 tube/s Hydrocortisone Cream 28g
- 1 box/es Zinc Oxide + Calamine Ointment 3.5mg Sachet (20/box)
- 50 pc/s ORS Powder (Oral Rehydration Salts)
- 2 box/es Sterile Gauze 4x4 (100/box)
- 2 box/es Sterile Gauze 3x3 (100/box)
- 23 pack Cotton Balls, @300/pack
- 12 pc Sterile Surgical Gloves, Size 7.5
- 6 box/es Surgical Face Mask, 3-ply, earloop, 50's/box

Date
 (Sgd.) RAMIL S. CATAMORA, Ed.D.
 SAC, Chairperson
 I have read and understood the Terms and Conditions stated above.
 By signing this quote, I hereby agree and bind myself to the Terms and Conditions.

Signature Over Printed Name:
 Position in Firm:
 Business Address:
 Contact No.:

Canvassed by:
 (Signature Over Printed Name)

Other Information
 Please submit the following documentary requirements:
 1. Business/Mayor's Permit
 2. PhilGEPS Registration No./Certificate
 3. Omnibus Sworn Statement

Created by Jhenrose Savellino Billate
Date Created 29/04/2022

The PhilGEPS team is not responsible for any typographical errors or misinformation presented in the system. PhilGEPS only displays information provided for by its clients, and any queries regarding the postings should be directed to the contact person/s of the concerned party.



PROCUREMENT OFFICE

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Contact Number: **09173178126**

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Item No.	Qty.	Unit	Articles/Description	Supplier's Offer (Complete Specifications and Brand Name)	Unit Price
1	60	pc	Amlodipine (Norvasc), 10mg tab		
2	1	box/es	Amlodipine 5mg, (100/box)		
3	3	box/es	Losartan 100mg., tablet (30/box)		
4	25	pc/s	Captopril, 25mg		
5	2	box/es	Co-amoxiclav 375mg., @100/box		
6	3	box/es	Cefalexin 500mg, (100/box)		
7	1	box/es	Cetirizine 10mg, (100/box)		
8	2	box/es	Cloxacillin 500mg, (100/box)		
9	1	box/es	Hemostan Tranexamic Acid 500mg		
10	1	box/es	Hyoscine N-Butylbromide 10mg		
11	1	box/es	Famotidine, Calcium Carbonate, Magnesium Hydroxide, 10mg/800mg/165mg/178mg/30mg (100/box)		
12	2	box/es	Loperamide 2mg		
13	2	box/es	Loratadine, 10mg		
14	1	box/es	Meloxicam, 15mg (100/box)		
15	3	box/es	Phenylpropanolamine HCl Chlorphenamine Maleate Paracetamol (100/box)		
16	1	box/es	Ofloxacin 400 mg Pharex Tablet (100/box)		
17	1	box/es	Omeprazole, 20mg		
18	100	box/es	Betahistine 16mg tab		
19	2	box/es	Carbocisteine 500mg (100/box) - Generic		
20	2	box/es	Carbocisteine 500mg - Non-generic (100/box)		
21	3	pc/s	Eye drops for Red Eyes (Tetrahydrozoline HCl)		
22	3	pc/s	Mupirocin Ointment		
23	1	pc/s	Burn Ointment		
24	2	tube/s	Hydrocortisone Cream 28g		
25	1	box/es	Zinc Oxide + Calamine Ointment 3.5mg Sachet (20/box)		
26	50	pc/s	ORS Powder (Oral Rehydration Salts)		
27	2	box/es	Sterile Gauze 4x4 (100/box)		
28	2	box/es	Sterile Gauze 3x3 (100/box)		
29	23	pack	Cotton Balls, @300/pack		
30	12	pc	Sterile Surgical Gloves, Size 7.5		
31	6	box/es	Surgical Face Mask, 3-ply, earloop, 50's/box		
Please submit the following documentary requirements:					
1. Business/Mayor's Permit					
2. PhilGEPS Registration No./Certificate					
3. Omnibus Sworn Statement					

Date _____

I have read and understood the Terms and Conditions stated above.
By signing this quote, I hereby agree and bind myself to the Terms and Conditions.

Signature Over Printed Name: _____
Position in Firm: _____
Business Address: _____
Contact No.: _____

Canvassed by: _____

RAMIL S. CATAMORA, Ed.D.
BAC Chairperson

(Signature Over Printed Name)