



Republic of the Philippines
City Government of Muntinlupa
National Road Putatan Muntinlupa City
BIDS and AWARDS COMMITTEE
www.muntinlupacity.gov.ph

REQUEST FOR QUOTATION

Date: 01/23/2023
Quotation No:2022-0387

Company Name: _____

Address: _____

Business Permit No.: _____

TIN: _____

PhilGEPS Registration No.(required): _____

The City Government of Muntinlupa, through its Bids and Awards Committee, intends to procure **Antiretroviral Drugs** requested by City Health Office, which will be undertaken in accordance with **Section 52.1.b** of the 2016 Revised Implementing Rules and Regulations of Republic

Please quote your **best offer** for the item/s described herein, subject to the Terms and Conditions provided.

A copy of the following documents are also required to be submitted along with your quotation/proposal:

1. Mayor's/Business Permit: (Certified True Copy)	3. PhilGEPS Registration (Certified True Copy)
2. Accomplished and Notarized Omnibus Sworn Statement (Original)	4. Certificate of Registration (Certified True Copy)

Quotations/Proposals must be submitted to the BAC Office of the City Government of Muntinlupa for checking & validation.

For any clarification, you may contact **Bids & Awards Committee** at telephone no.(02)8861-1127

INSTRUCTIONS:

- (2) Do not alter the contents of this in any way.
- (3) technical specifications with asterisks(*) are mandatory. Failure to comply with any of the mandatory requirements will disqualify your
- (4) Failure to follow these instructions will disqualify your entire quotation.

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

Procurement Project	Approved Budget for the Contract (ABC)
Antiretroviral Drugs requested by City Health Office	One hundred seventy two thousand five hundred pesos

Technical Specifications:

QTY	UNIT OF ISSUE	ITEM DESCRIPTION	Compliance		REMARKS
			Yes	No	
50	btl	Lopinovir/Ritonovir 200/50mg film-coated tablet protease inhibitor combination, 120 tablets/bottle			
50	btl	Lamivudine/Tenofovir/Efavirenz 300/300/600mg film-coated tablet; 30 tablets/bottle			



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Summary of Approved Budget			OFFERED QUOTATION			
QTY	UNIT OF ISSUE	ITEM DESCRIPTION	QTY	UNIT OF ISSUE	ITEM DESCRIPTION	TOTAL PRICE
50	btl	Lopinovir/Ritonovir 200/50mg film-coated tablet protease inhibitor combination, 120 tablets/bottle				
50	btl	Lamivudine/Tenofovir/Efavirenz 300/300/600mg film-coated tablet; 30 tablets/bottle				
			172,500.00		Total Offered quotation (in Php)	Php _____

TERMS AND CONDITIONS:

1. Bidders shall provide correct and accurate information required in this form.
2. Bidders must quote for all or all the items.
3. Price quotation/s must be valid for a period of thirty (30) calendar days from the date of submission.
4. Price quotation/s, to be denominated in Philippine peso shall include all taxes, duties and/or levies payable.
5. Quotations exceeding the Approved Budget for the contract shall be rejected.
6. Award of contract shall be made to the lowest quotation (for goods and infrastructure) or, the highest rated offer (for consulting services) which complies with the minimum technical specifications and other terms and conditions stated herein.
7. Any interlineations, erasures overwriting shall be valid only if they are signed or initialed by you or any of your duly authorized representative/s.
8. The Item/s shall be delivered according to the requirements specified in the Technical Specifications.
9. The GSO shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.

Signature over Printed Name

Position/Designation

Office Telephone No.

Mobile Phone No./Fax No.

Email address/es