

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: 3/21/2025 Quotation No:2025-0175
Company Name:		
Address:		
Business Permit No.:		
TIN:		
PhilGEPS Registration No.(required):	The second secon	

The City Government of Muntinlupa, through its Bids and Awards Committee, intends to procure Supply & Delivery of Various Supplies to be used for the Repair of GE Vivid T8 Ultrasound Machine, which will be undertaken in accordance with Section 53.9 of the 2016 Revised Implementing Rules and Regulations of Republic Act No.9184.

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)	4. PhilGEPS Registration (Certified True Copy)
2. Omnibus Sworn Statement (original)	5.Certificate of Registration (Certified True Copy)
3. Latest Income Tax (Certified True Copy)	6. Tax Clearance (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

Approved Budget for the Contract (ABC)

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.

Procurement Project

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

upply & Delivery of Various Supplies to be used for the Repair of GE Vivid T8 Ultrasound Machine		One Hundred Sixty Two Thousand Pesos Only			
			Compliance		REMARKS
QTY UNIT O	UNIT OF ISSUE	ITEM DESCRIPRION	Yes	No	
		R & M MEDICAL EQUIPMENT			
		(GE Vivid T8 Ultrasound Machine)			
1	рс	5 Lead ECG CBL.L-3.6M-For USA			
1	pc	Lead Wire, Grabber, 1.3M, White, For USA			
1	рс	ECG Green Lead Wire			
1	рс	Lead Wire, Grabber, 1.3M, Black, For USA			
1	рс	Isolation Transformer			
1	рс	UPS-3kVa			



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		Terms and Conditions:				
		Delivery must be done within sixty (60) days upon receipt of Purchase Order				
		Comprehensive thirty (30) days warranty on parts and services.				
		****nothing follows****				
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	· ·	nmary of Approved Budget		OFFE	RED QUOTATION	
	UNIT OF			UNIT OF		
QTY	ISSUE	ITEM DESCRIPTION	QTY	ISSUE	ITEM DESCRIPTION	TOTAL PRICE
		R & M MEDICAL EQUIPMENT				
		(GE Vivid T8 Ultrasound Machine)				
1	рс	5 Lead ECG CBL.L-3.6M-For USA				1
1	pc	Lead Wire, Grabber, 1.3M, White, For USA				
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		Terms and Conditions:				
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		Comprehensive thirty (30) days warranty on parts and services.				
		****nothing follows****				
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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