

REQUEST FOR QUOTATION

ate:	·	0.000-
		PR No.: 2 0 2 5 · 07 - 11%
	-	Pupose: Annual Physical Examination of
	NAME OF COMPANY / FIRM / DEALER	Thirty-Nine employees of NIA MIMAROPA
		Region on September 8, 2025 to October
	ADDRESS	15, 2025
	TIN NO. / VAT or NVAT	
	PhilGEPS Registration Number	

Please quote your **best offer**, inclusive of VAT, on the job/item/s listed below, **subject to the Specifications and Terms & Conditions** stated herein, stating the shortest time of delivery. Submit your quotation duly signed by you or your authorized representative not later than JULY 28, 2025 only until exactly 5:00PM at the NIA MIMAROPA Regional Office, Bayanan II, Calapan City, Oriental Mindoro. A copy of your 2025 Business/Mayor's Permit and PhilGEPS Registration Number / Certificate are also required to be submitted along with your quotation /proposal.

A **notarized Omnibus Sworn Statement (GPPB-prescribed form) and copy of Income / Business Tax Return** will also be required to be submitted **prior to award.**

Failure to observe any of the herein Specifications and Terms & Conditions shall be ground for disqualifications of the badders concerned.

ENGR. DOWELL L. DO ANO BAC Charperson

Note: Please see the Terms and Conditions regarding proper accomplishment of this Form.

NO. QTY.	QTY.	UNIT	ARTICLES / SPECIFICATIONS	APPROVED BUDGET FOR THE	Compliance w/ Specs.		UNIT PRICE	TOTAL BID PRICE	
					CONTRACT (ABC)	YES	NO	PRICE	PRICE
1		LOT		L PHYSICAL EXAMINATION FOR NIA	253,000.00			1.1	
		201	MIMAROPA REGIO	NAL EMPLOYEES FOR CY 2025	200,000,00				
			****To be conducted on Sept	tember 8, 2025 to October 15, 2025****					,
			ANNUAL PHYSICAL E	KAMINATION PACKAGE (39 PAX)					
- 1			INCLUSIONS:						
			BENEFIT PACKAGE						
			Comprehensive History						
			Complete physical examination						
		1 1	Interpretation of Results and Rec	ommendations			.9		
			DIAGNOSTIC EXAM:						
			Urinalysis						
			Complete Blood Count (CBC)						
			Lipid Profile						
			Fasting Blood Sugar (FBS)						
			Hemoglobin A1C (HbA1C)						
			Blood Uric Acid (BUA)						
		-	Blood Urea Nitrogen (BUN)						1
			Creatinine						
			Serum Glutamic-Oxaloacetic Tra	nsaminase (SGOT)					
			Serum Glutamic Pyruvic Transan	ninase (SGPT)					
			High-Sensitivity C-Reactive Prote	in (HSCRP)					
			Chest X-ray						
			ECG (12 Leads)						-
				iver, Pancreas, Spleen, Gallbladder, Kidney,					
			Urinary Bladder, Prostate for me						
			DIAGNOSTIC EXAMINATION W	-					
			,	WOMAN 35 YRS. OLD AND ABOVE) (3 PAX)	')				
			,	PSA) (FOR MEN 40 YRS. OLD AND ABOVE) (1	PAXJ				
			Breast Ultrasound for female em *** nothing follows***	ployees (17 PAX)	-	 			
			xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx						
ELIVE	DV DEDIO	D	releader deve						
ELIVE	KY PERIO	ט:	calendar days	momal (**comm					***************************************
				TOTAL AMOUNT	:				





TERMS AND CONDITIONS

- 1. All entries must be legibly written. Bidders shall provide correct and accurate information required in this form.
- 2. Bidders shall also submit brochure showing specifications of the product being offered. (If applicable)
- 3. Bidders shall submit BIR Certificate of Registration upon request of the Technical Working Group during bid evaluation.
- 4. All bids exceeding the Approved Budget for the Contract (ABC) shall be automatically disqualified.
- 5. Delivery period is within 15 working days from receipt of Approved Purchase Order.
- 6. Price validity shall be for a period of <u>60</u> calendar days from the date of submission. Price quotation/s, to be denominated in Philippine Peso shall include all taxes, duties and/or levies payable.

7. For Lot Award

All items to be grouped together to form one (1) complete Lot that will be awarded to one Bidder to form one (1) complete contract. Bidder must offer/quote on all items, otherwise, bidder shall automatically be disqualified.

- 8. Bid not addressing or providing price on the required items shall be considered as Not Available or Out of Stock. However specifying a zero(0) or a dash (-) for the said item would mean that it is being offered for free to the Procuring Entity.
- 9. Warranty shall be one (1) year for equipment and six (6) months for supplies and materials from date of approval of the Report of Inspection & Acceptance (RIA) by the authorized NIA MIMAROPA Regional Office representative.
- 10. Bidders shall submit one (1) accomplished Bid/Request for Quotation (RFQ) together with the following documents placed in one (1) sealed envelope, namely:
 - a.) Mayors Permit;
 - b.) Copy of PhilGEPS Registration Number / Certificate.
- 11. Any interlineations, erasures or overwriting shall be valid only if they are signed or initialed by the bidder or his/her duly authorized respresentative.
- 12. Award of contract shall be made to the lowest quotation (for goods and insfrastructure) or the highest rated offer (for consulting services) which complies with the minimum specifications and terms and conditions stated herein.
- 13. The NIA MIMAROPA Regional Office shall have the right to inspect and/or to test the goods to confirm their conformity to the technical specifications.
- 14. Supplier shall be responsible for the source(s) of his/her product and shall make deliveries in accordance with schedule, quality and specifications of the award/purchase order and shall guarantee his/her deliveries to be free from defects. Failure of the supplier to comply with this provisions shall be ground for cancellation of the award or purchase order issued to the supplier.
- 15. Liquidated damages equivalent to one tenth of one percent (0.001%) of the value of the undelivered item/s within the prescribed delivery period shall be imposed per day of delay. The NIA MIMAROPA Regional Office 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 courses of action and remedies open to it.
- 16. The NIA MIMAROPA Regional Office as the Procurring Entity may use a non-discretionary and non-discriminatory measure based on a sheer luck or chance through "DRAW LOTS" to resolve the cases involving a tie among bidders determined and declared as the Lowest Calculated and Responsive Bidder (LCRB) for the procurement of goods and infrastructure projects, or the Highest Rated and Responsive Bidder (HRRB) for the procurement of consulting services.

TERMS OF PAYMENT:

The winning bidder / supplier shall be paid the contract amount in full within $\underline{30}$ calendar days upon delivery and acceptance of the item/s by the NIA MIMAROPA Regional Office subject to deduction of applicable taxes.

NOTE:

- 1. Bid quotation may be submitted to the NIA MIMAROPA Regional Office, NIA Administrative Building, Second Floor, Bayanan II, Calapan City, Oriental Mindoro, Fax No. 043-288-7267 or by email at mimaropa@nia.gov.ph and niamimaropa.bac@gmail.com.
- 2. If quotation will be submitted thru email, kindly compress the file thru .zip or .rar with encryption / password to maintain confidentiality. Kindly include your contact details at the body of the email so that the BAC Secretariat could verify the password upon opening of your submitted quotation. If there is no input password, your bid will not be considered.
- 3. Please make a certain to affix the signature of the owner, manager or any of its duly authorized representative in a clear legible manner.

After having carefully read and accepted the Terms and Conditions, I/We submit our quotation/s on the item/s at prices noted above.

	Printed Name & Signature
	of Dealer or Representative
-	Contact / Tolonhone No
	Contact / Telephone No.