



## Bid Notice Abstract

### Request for Quotation (RFQ)

**Reference Number** 6289394  
**Procuring Entity** DEPARTMENT OF TOURISM  
**Title** Procurement of Medicine for the DOT Medical Clinic and Regional Offices

**Area of Delivery**

<b>Solicitation Number:</b> 2019-07-0140 <b>Trade Agreement:</b> Implementing Rules and Regulations <b>Procurement Mode:</b> Negotiated Procurement - Small Value Procurement (Sec. 53.9) <b>Classification:</b> Goods <b>Category:</b> Medical Supplies and Laboratory Instrument <b>Approved Budget for the Contract:</b> PHP 409,060.00 <b>Delivery Period:</b> <b>Client Agency:</b> <hr/> <b>Contact Person:</b> John Paulo Samonte Francisco Administrative Officer I 351 Sen. Gil Puyat Avenue Makati City Metro Manila Philippines 1200 63-02-4595200 Ext.425 63-02-4595200 psfrancisco.logistics@yahoo.com	<b>Status</b>	<b>Pending</b>
	<b>Associated Components</b>	3
	<b>Bid Supplements</b>	0
	<b>Document Request List</b>	0
	<b>Date Published</b>	03/07/2019
	<b>Last Updated / Time</b>	02/07/2019 15:56 PM
	<b>Closing Date / Time</b>	08/07/2019 10:00 AM

**Description**

TECHNICAL SPECIFICATION (REVISED)  
 MEDICINES FOR THE DOT MEDICAL CLINIC AND REGIONAL OFFICES

**I. SPECIFICATIONS:**

**MEDICINES:**

Lot Unit Generic Name Quantity

- 1 Tablet Cefuroxime 500mg/tab 1500
- 2 Tablet Losartan 100mg/tab 3000
- 3 Tablet Amlodipine 10mg/tab 3500
- 4 Tablet Atorvastatin 40mg/tab 3000
- 5 Tablet Metformin 500mg/tab 3500
- 6 Tablet Meloxicam 15mg/tab 500
- 7 Tablet Mefenamic Acid 500mg/tab 4000
- 8 Tablet Paracetamol 500mg/tab 6000
- 9 Tablet Phenylephrine HCl + Paracetamol Non-Drowsy 10mg/500mg tab 4350
- 10 Tablet Carbocisteine 500mg/tab 4000
- 11 Tablet Butamirate Citrate 50mg/tab 3500
- 12 Tablet Aluminum Hydroxide 178mg + Magnesium Hydroxide 233mg + Simeticone 30 mg tab 400
- 13 Capsule Loperamide 2mg/cap 2000
- 14 Tablet Domperidone 10mg/tab 350
- 15 Tablet Omeprazole 40mg/tab 500
- 16 Tablet Cetirizine 10mg/tab 400
- 17 Tablet Betahistine Dihydrochloride 16mg/tab 300
- 18 Bottle Salbutamol Nebulizing Solution 30ml/bottle 50

**A. DELIVERY REQUIREMENTS:**

- Delivery of medicines to DOT Main Office at Makati City
- Supplier of medicines should be FDA registered; medicines should have FDA certifications.
- Expiration dates of the purchased medicines should be at least two (2) years after the delivery date

III. PAYMENT PROCEDURE: Memorandum of Agreement  
Procedure – Send Bill Arrangement

IV. BUDGET ESTIMATE: P 409,060.00

VI. CONTACT PERSON: DR. RAUL S. ALCANTARA  
Tel. No. (02) 4595200 Local # 220  
DOT Medical Clinic – Main

Partial bids are allowed. All goods are grouped in lots. Bidders shall have the option of submitting a proposal on any or all lots and evaluation and contract award will be undertaken on a per lot basis. Lots shall not be divided further into sub-lots for the purpose of bidding, evaluation, and contract award.

Note: The winning bid shall be determined based on the proposal with the most advantageous financial package cost provided that the amount of the bid does not exceed the above total budget.

Kindly submit your quotation for the purchase of the above requirement, indicating our Solicitation Number & your Company Name in a SEALED ENVELOPE, addressed to Mr. John Paulo S. Francisco at DOT Bldg., 4th Floor, Procurement Management Division, 351 Sen. Gil Puyat Avenue, Makati City

PLEASE SUBMIT THE FOLLOWING DOCUMENTS:

1. Current Mayor's/Business Permit/BIR Certification of Registration (Individual) (In case of recently expired Mayor's/Business permit, submission of the expired Mayor's/Business permit together with the Official Receipt (renewal) shall be accepted.
2. Philgeps Registration Number
3. Latest Income/Business Tax Return (For ABCs above Php500K)
4. Original or Certified True copy of Duly Notarized Omnibus Sworn Statement (see attached form)

Deadline for the submission of Quotation: on or before July 08, 2019 at 10:00 am

**Created by** John Paulo Samonte Francisco

**Date Created** 02/07/2019

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