



Bid Notice Abstract

Request for Quotation (RFQ)

Reference Number: 8976938
 Procuring Entity: CITY OF PASIG
 Title: Preventive Maintenance for Calibration and Replacement of Parts for Anesthesia Machine for the Use of the Nursing Services Office - Pasig City Children's Hospital
 Area of Delivery: Metro Manila

Solicitation Number:	100-22-07-929	Status	Active
Trade Agreement:	Implementing Rules and Regulations	Associated Components	2
Procurement Mode:	Negotiated Procurement - Small Value Procurement (Sec. 53.9)	Bid Supplements	0
Classification:	Goods	Document Request List	0
Category:	Hospital / Medical Equipment Services	Date Published	02/09/2022
Approved Budget for the Contract:	PHP 55,000.00	Last Updated / Time	02/09/2022 00:00 AM
Delivery Period:	90 Day/s	Closing Date / Time	05/09/2022 10:00 AM
Client Agency:			
Contact Person:	Rho Depaudhon BAC Secretariat		

Pasig City Hall, Caruncho Avenue,
Barangay San Nicolas,
Pasig City
Metro Manila
Philippines 1600
63-2-86431111 Ext.1461

bidsandawards@pasigcity.gov.ph

Description

Items Quantity / Units

Preventive Maintenance, Calibration and Replacement of Parts for Anesthesia Machine

1 Adjustable Pressure Limiting (APL) Top Assembly with Screw,
- (PN: 2090000-001-S)

1 Pcs

2 One-Time Preventive Maintenance for Carestation 620 Anesthesia Machine,
- Scope of Works:

- General assessment/diagnosis of machine
- Condition per standard of manufacturer
- Repair if applicable (if no parts are required)
- Calibration, Testing, Performance Verification

Warranty: 90 days

1 Lot

PRICE QUOTATION/S SHOULD BE PRINTED ON COMPANY'S OFFICIAL LETTERHEAD TOGETHER WITH THE FOLLOWING UPDATED DOCUMENTS;

- Mayor's/Business Permit
- PhilGEPS Registration Number
- Income/Business Tax Return
- Accomplished and notarized Omnibus Sworn Statement ([https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement\(Revised\).docx](https://www.gppb.gov.ph/assets/forms/Omnibus%20Sworn%20Statement(Revised).docx))
- Proof of Authorization: Secretary's Certificate if corporation, or Special Power Of Attorney, if individual

NOTE:

TO BE SUBMITTED SEALED AND LABELED ON A LONG BROWN ENVELOPE, FOLLOWING THIS FORMAT AS FOLLOWS:

FOR:

ATTY. JOSEPHINE C. LATI-BAGAOISAN
BAC Chairperson

THRU:

ATTY. PONCE MIGUEL D. LOPEZ
Head-BAC Secretariat
BAC Secretariat's Office
4th Floor, Pasig City Hall,
Caruncho Avenue,
Pasig City

DATE : _____

COMPANY'S NAME : _____

PhilGEPS REFERENCE NUMBER : _____

PROJECT TITLE : _____

Created by Rho Depaudhon

Date Created 01/09/2022

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.