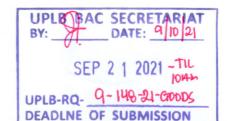


## UNIVERSITY OF THE PHILIPPINES

LOS BANOS Los Banos, IV-A VAT Reg. TIN: 000-864-006-00004



Request for Quotation/ Bid Form (Technical Specifications) **CVM Veterinary Teaching Hospital** 

		UPLB-RQ-	
		DEADLINE OF SUBMISSION:	
Suppliers Name:	Date	25 August 2021	
	Fund Code:	9190800	
	MOP:	Competitive Bidding	
	Contact No:	(049) 5360-1810	
	Contact Person	Dave G. Escosura	

Please quote your lowest price on the item/s listed below, subject to the General Conditions below.

- Bidders shall provide correct and accurate information required in this form. All entries must be typewritten or in print and properly accomplished. Do not leave blank entries, put N/A for not applicable.

  Price quotation/s to be denominated in Philippine Peso shall include all taxes, duties, and/ or levies payable.

  Bidders must indicate the BRAND and MODEL NUMBER for equipment and its accessories or peripherals. Evidence shall be in the form of manufacturer's un-amended sale literature, unconditional statement of A. Quotation through fax/email is acceptable. Winning bidder shall submit original signed RQ before issuance of Puchase order (P.O.).

  Quotations exceeding the Approved Budget for Contract shall be rejected.

  Documentary requirements per Memorandum No. 03 Series of 2017 shall be attached upon submission of the quotation.

ITEM No.	GENERAL NAME OF THE ITEM	REQUIRED SPECIFICATIONS	UNIT OF MEASURE	QTY	ESTIMATED UNIT APPROVED BUDGET OF THE CONTRACT	ESTIMATED TOTAL APPROVED BUDGET OF THE CONTRACT	OFFERED SPECIFICATION Suppliers must atale here the detailed technical specifications of their offer against each of the individual parameters of each requirements	QUOTED UNIT PRICE	TOTAL QUOTED PRICE	EVALUATION (Leave this space blank, For BAC/ Evaluators only)
1	Dewormer, Albendazole	11.36% oral suspension, 1L bottle, Expiration: atleast 1 year and 6 months from the date of delivery	btl	2	5200	10,400.00				
2	Dewormer, Levamisole	7.5% oral solution, 1L bottle, Expiration: atleast 1 year and 6 months from the date of delivery	btl	2	400	800.00				
3	Dewormer, Ivermectin	injectable, 10 mg/ ml, sterile solution for subcutaneous injection, 100 ml/ bottle, Expiration: atleast 1 year and 6 months from the date of delivery	bti	1	2250	2,250.00				
4	Dewormer, Ivermectin	1.87%, oral, 6.42 grams syringe, complete horse wormer, Expiration: atleast 1 year and 6 months from the date of delivery		6	660	3,960.00				
5	Dewormer, Oxfendazole	oral solution, 1 liter bottle, Expiration: atleast 1 year and 6 months from the date of delivery	bti	1	2669	2,669.00				
6	Medication, Atropine sulfate	injectable solution, 15 mg/ml LA, 100 ml bottle, Expiration: atleast 1 year and 6 months from the date of delivery		1	2000	2,000.00				
7	Medication, Tolfenamic acid	4% tolfenamic acid, 100 ml bottle, Expiration: atleast 1 year and 6 months from the date of delivery	bt <b>i</b>	2	1500	3,000.00				
8	Medication, Toltrazuril	5% suspension, 250 ml, Expiration: atleast 1 year and 6 months from the date of delivery	btl	2	3000	6,000.00				
9	Oxytocin	10 u/ml, 1ml, 10 ampules/box, Expiration: atleast 1 year and 6 months from the date of delivery	bti	4	500	2,000.00				
10	Vitamins, Vitamin ADE	veterinary preparation, each ml contains: Vitamin A: 500,000 I.U., Vitamin D: 100,000 I.U., Vitamin E: 100 I.U. injectable, 100 ml/ bottle, Expiration atleast 1 year and 6 months from the date of delivery	btl	8	500	4,000.00				
11	Vitamins, Vitamin B12 + Butaphosphan	100 mg/ml. Butaphosphan 50µg/ml Cyanocobalamin (Vitamin B12), injectable solution 100 ml bottle, Expiration: atleast 1 year and 6 months from the date of delivery	b#	2	1600	3,200.00				
12	Vitamins, Vitamin B complex with iron	Iron dextran 100 mg, Cyanocobalamin 50 mcg solution for injection, 100 ml bottle, Expiration atleast 1 year and 6 months from the date of delivery	lets.	3	730	2,190.00				
13	Anesthetic, Lidocaine	20mg/ml (2%), solution for injection, 50 ml vial Expiration: atleast 1 year and 6 months from the date of delivery		2	150	300.00				
14	Anesthetic, Tiletamine HCI, zołazepam base	Tiletamine HCl 125 mg, zolazepam base 125 mg, reconstituted soln 50 mg/ml, 5ml/bottle,fo IM injection, Expiration: atleast 1 year and 6 months from the date of delivery	r u	1	2000	2,000.00				
15	Anesthetic, Xylazine hydrochloride	100 mg/ml, 50 ml/bottle, injectable anaesthetic solution, Expiration: atleast 1 year and 6 months from the date of delivery		1	5980	5,980.00				
16	Antibiotic, Amoxicillin trihydrate	150mg/ml, long acting, suspension for injection 100ml/bottle, Expiration: atleast 1 year and 6 months from the date of delivery	5 btl	2	600	1,200.00				
17	Antibiotic, Enrofloxacin	SOmg/ml, solution for injection, 100 ml bottle Expiration: atleast 1 year and 6 months from the date of delivery	e bti	1	3500	3,500.00				
18	Antibiotic, Oxytetracycline	200mg/ml long acting, solution for injection, 100 m bottle, Expiration: atleast 1 year and 6 months from the date of delivery		2	650	1,300.00				
19	Antibiotic, Sulfamethoxypyrid azine with trimethoprim	40mg trimethoprim, 200 mj sulfamethoxypyridazine, solution for injection 100ml bottle, Expiration: atleast 1 year and 6 months from the date of delivery		2	850	1,700.00				
			-		SUB-TOTAL ABO	58,449,00		1	+	-



Signature over Printed Name of Representative; Position:

## Los Banos, IV-A VAT Reg. TIN: 000-864-006-00004

## Request for Quotation/ Bid Form (Technical Specifications) <u>CVM Veterinary Teaching Hospital</u>

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						Contact No:	(049) 5360-1810		•		
						Contact Person	Dave G. Escosu		•		
Note	: 1. Bidders shall provide	Please quote your lowest price on to									
	Bidders must indicated. Quotation through     Quotations exceed	be denominated in Philippine Peso shall include ate the BRAND and MODEL NUMBER for equip- fax/email is acceptable. Winning bidder shall sub- ling the Appoved Budget for Contract shall be rej irements per Memorandum No. 03 Series of 2017	nent and its mit original acted.	s acces signed	and/ or levies paya ssories or periphera I RQ before issuan	ble.  Ils. Evidence shall  ce of Puchase orde  of the quotation	he in the form of manufacturaris un				
ITEM No.	GENERAL NAME OF THE ITEM	REQUIRED SPECIFICATIONS	UNIT OF MEASURE	QTY	ESTIMATED UNIT APPROVED BUDGET OF THE CONTRACT	ESTIMATED TOTAL APPROVED BUDGET OF THE CONTRACT	OFFERED SPECIFICATION Suppliers must state here the detailed technical specifications of their offer against asch of the individual parameters of each requirements	QUOTED UNIT	TOTAL QUOTED PRICE	EVALUATION (Leave this space blank, For BAC) Evaluators only	
20	Antipyretic, Flunixin Meglumine	50mg/ml, 100 ml bottle, Expiration: atleast 1 year and 6 months from the date of delivery	btl	1	2000	2,000.00			The second secon		
21	Tetanus antitoxin	1500 IU/0.7ml solution for injection, Expiration atleast 1 year and 6 months from the date of delivery		20	250	5,000,00					
22	Tetanus toxoid adsorbed	40 IU/ 0.5 ml suspension for IM injection, 10 ampoules/ box, Expiration: atleast 1 year and 6 months from the date of delivery	box	2	1000	2,000.00					
23	Wound spray	natural remedies pet wound healing spray, 75ml, canister, Expiration: atleast 1 year and 6 months from the date of delivery	ctr	4	410	1,640.00					
24	oxytetracycline heridex wound spray	anti-bacterial, anti-infective, 150 ml/ canister, Expiration: atleast 1 year and 6 months from the date of delivery	ctr	4	360	1,400.00					
25	Mupirocin ointment	USP, 2%, 20mg/g; 5 grams per tube, Expiration atleast 1 year and 6 months from the date of delivery	tub	5	400	2,000.00		7			
-					SUB-TOTAL ABC	14,040.00					
					TOTAL ABC	72,489.00					
	Reviewed and Chec	Ariel M. Bombio					TOTAL QUOTED AMOUNT IN	WORDS:			
Ple	ase quote et vous a	BAC TWG									
. 10	ase doore at your gr	overnment price (including VAT) and state office as so	that the ton as pos	imę wi sible d	thin which you c on or before the	an make delivery deadline stated h	y. It will be appreciated if we can perein.	ın have your qu	otation in the		
	S AND CONDITIONS:						Dave 6. Escosura BUYER/ END-USER				
1. Price	der to assure that manual	lid for a period of at least (30) calendar days from the	date of sub	mission	1.						
SUPPL	JES, or a minimum of o	facturing defects shall be corrected by supplier, a ware (1) year warranty and two (2) to three (3) years	extended	ty shall	be required from the	contract awardee to	or a minimum period of three (3) moni	ths, in the case of t	EXPENDABLE		
			oxterioed .	arrani	A (11 abblicable) III (	re case of NON-EXP	PENDABLE SUPPLIES after acceptar	ice by End-user of	the delivered		
4. Ame	very period within	_ calendar days.									
		ade to the lowest quotation wich complies with the tex eject any or all offers as may be considered most ad									
6. Any	interlineations, erasure,	or overwriting shall be valid only if they are signed or	initiated by	vou or a	any of your duly auth	orized representative	ale.				
		GPPB Resolution No. 21-2017)									
		REQUIREMENTS	Shopp	ina	Negotiated	Negotiated	Nogational December 2011 100		4		
		•	(Section		Procurement- Small Value	Procurement- Lease of Real	Negotisted Procurement- Scientific, Scholarly or Artistic Work, Exclusive Technology and Media Services	Procurement- Emergency			
	A4 1 16 1				Procurement (Section 53.9)	Property or Venue (Section 53.10)	(Section 53.6)	(Section 53.2)			
	Mayor's/Business Perm PhilGEPS Registration		/		1	/	/	/			
3	Professional ficense/ CN	V (consulting services)	1	State of the last	/	,	/	/			
4	PCAB License (for Infra	structure)			/		/				
		returns (except for government agencles as lessor)	7.00		FOR ABC'S ABOVE	,	,	FOR ABC'S ABOVE			
6	Omnibus Sworn Statem	ent	E CONTRACTOR		FOR ABC'S ABOVE		Section of the sectio	FOR ABC'S ABOVE			
7	NFCC for Infrastructure	with ABC above Ph500k			ISOK /		THE PARTY OF THE P	500K			
After I	having carefully read of the Company:	d and accepted your General Conditions, I/	We quote	you o	on the Item at price	ces noted above		FOR ABO'S ABOVE	i-		
468110	of the Company.										
Addre	ss:					Tel. No. : Fax No. :			r C		

Email Address: