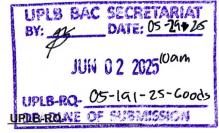


UNIVERSITY OF THE PHILIPPINES

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

Request for Quotation/ Bid Form (Technical Specifications)

<u>BIOTECH-IMMUNOLOGY LABORATORY</u>



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UPDB-RONE	OF	SUBMISSION
AND DESCRIPTION OF THE PERSON NAMED IN	MENORSH ! N	
DEADLINE OF		

								SUBMISSIO		
	Suppliers I	Name:				Date				
				-		Fund Code:	General Fund Code:	47-000-04		
						MOP: Contact No:	09063281449 /0917	1375173 / 09461	697849	
						Contact	Lorna U. Manalo/LADILYN	A. ABRIGO		
ote:		Please quote your lowest price on the item/s								- 0729
	 Bidders applicable. 	shall provide correct and accurate information required in this	form. All e	ntries r	nust be typewritt	en or in print an	d properly accomplished.	Do not leave b	ank entries,	put N/A for not
	2. Price qu	otation/s to be denominated in Philippine Peso shall include all								
	3. Bidders	must indicate the BRAND and MODEL NUMBER for equipme nal statement of specification and compliance issued by the m	nt and its a	ccesso	ries or periphera	lls. Evidence sh	all be in the form of manuf	acturer's un-an	nended sale	literature,
		on through fax/email is acceptable. Winning bidder shall submi				ce of Puchase of	order (P.O.).			
		ons exceeding the Appoved Budget for Contract shall be rejecte entary requirements per Memorandum No. 03 Series of 2017 si		ched u	non eubmission	of the quotation				
	7. Others:									
		RFQ for PR No.:	Laborato	ry Sup	plies and Equipn	nent 3rd qtr 202	5 07294			
					ESTIMATED	ESTIMATED	OFFERED SPECIFICATION			EVALUATION
TEM	GENERAL NAME OF	REQUIRED SPECIFICATIONS	UNIT OF	QTY	UNIT APPROVED	TOTAL APPROVED	Suppliers must state here the detailed technical specifications	QUOTED UNIT	TOTAL	(Leave this
No.	THE ITEM	REQUIRED SPECIFICATIONS	MEASURE	ui Y	BUDGET OF THE CONTRACT	BUDGET OF THE	of their offer against each of the individual parameters of each	PRICE	QUOTED	space blank. Fo BAC/ Evaluators
					CONTRACT	CONTRACT	requirements			only)
230		Centrifuge bottle with sealing closure, 500mL capacity,								
1	centrifuge	polypropylene copolymer, polypropylene closure with	pck	1	32,000.00	33 000 00				
,	bottle	silicone gasket,, 4 bottles/pack; (for HANNIL	pck	'	32,000.00	32,000.00				
		Centrifuge)	-	-						-
2	laboratory	Laboratory Slippers, rubber, size 10, color white, closed			500.00	4 000 00				
2	slippers	toe but have holes on the side to allow for airflow, comfortable and slip resistant	pair	2	600.00	1,200.00				
-			-	-						
		Pipettor, volume range: 500 to 5,000 uL at 5 uL increments; Inaccuracy and imprecision: ± 0.6 to 0.5%;]						
		ergonomic, thumb shaped plunger button; fully								
3	pipettor	autoclavable and UV resistant; universal tip	рс	1	22,000.00	22,000.00				l
		compatibility; volume adjustment by wheel for easy one- handed adjustment; convenient volume lock; low weight								
		design								
		Pipettor, volume range: 1,000 to 10,000 uL at 10 uL								
		increments; Inaccuracy: ± 2.5 to 0.5%; Imprecision: ±								
4	pipettor	2.0 to 0.5%; ergonomic, thumb shaped plunger button; fully autoclavable and UV resistant; universal tip	рс	1	22,000.00	22,000.00				
	. ,	compatibility; volume adjustment by wheel for easy one-	Po		22,000.00	22,000.00				
		handed adjustment; convenient volume lock; low weight design								
-										-
5	pipette	Pipette tips, 5,000 uL non-filtered tips, Non-Sterile and Non-RNase/DNase or Pyrogen free, Made of	pck	1	2,500.00	2,500.00				
٠	tips	Polypropylene, 100 pcs/pack, Weight: 5.0 lbs	por		2,500.00	2,500.00				
		Pipette tips, 10,000 uL non-filtered tips, Non-Sterile and	-	-				-		
6	pipette	Non-RNase/DNase or Pyrogen free, Made of	pck	1	4,400.00	4,400.00				
	tips	Polypropylene, 100 pcs/pack, Weight: 5.0 lbs								
						84,100.00	TOTAL QUOTED AMOU	INIT IN IMODD		
	Paviound	and Checked By:					TOTAL QUOTED AWOU	IN WORD	5 :	
	Reviewed	and Checked By:								
		MARK ANTHONY BADUA								
Plea	se quote a	BAC TWG It your government price (including VAT) and state that the	time with	nin whi	ch vou can mal	ce delivery. It w	rill be appreciated if we c	an have your	quotation ir	i
		the office as soon as p				e stated herein		, , , , , , , , , , , , , , , , , , , ,	•	
						M	LELANO J. MANALO/ROSA BUENA C	ADUNO//DENE /	N DADA	
						LORIVA	BUYER/ END-USER	AI ONOMINENE A	LIALA	
	IS AND CON		of cubmicaio							
. In c	order to assu	s shall be valid for a period of at least (30) calendar days from the date re that manufacturing defects shall be corrected by supplier, a warranty	security sha	Il be req	uired from the cont	ract awardee for a	minimum period of three (3)	months, in the c	ase of	
XPE	NDABLE SU of the delivered	JPPLIES, or a minimum of one (1) year warranty and two (2) to three	e (3) years e	extended	d warranty (if appl	licable) in the case	e of NON-EXPENDABLE SUP	PLIES after acce	ptance by End	-
Del	livery period	within calendar days.								
Aw UP	ard of contra LB reserves t	ct shall be made to the lowest quotation wich complies with the technicated the right to reject any or all offers as may be considered most advantage.	al specification geous to the	ons, and Universi	other terms and co	onditon stated here	ein			
		ons, erasure, or overwriting shall be valid only if they are signed or initiat				d representative/s.				
equi	irements for	r Suppliers (GPPB Resolution No. 21-2017)								
		REQUIREMENTS	Shopp		Negotiated	Negotiated	Negotiated Procurement-	Negotiated		
			(Section	1 52)	Procurement- Small Value	Procurement- Lease of Real	Scientific, Scholarly or Artistic Work, Exclusive	Procurement- Emergency		
					Procurement	Property or	Technology and Media	(Section 53.2)		
		siness Permit	/		(Section 53.9)	Venue (Section	Services (Section 53.6)	/		
		Registration Number I license/ CV (consulting services)	/		/	/	/	/		
		se (for Infrastructure)			1		/			

5 Income / Business tax returns (except for government agencies as lessor)	FOR ABC'S ABOVE 500K	/	/	FOR ABC'S ABOVE 50K
6 Omnibus Sworn Statement	FOR ABC'S ABOVE 50K			FOR ABC'S ABOVE 500K
7 NFCC for Infrastructure with ABC above Ph500k	/			FOR ABC'S ABOVE 50K
	 	711		
ame of the Company:		Tel. No. :		
		Tel. No. : Fax No. :		
	_			
ddress:	-	Fax No. :		
ignature over	-	Fax No. :		