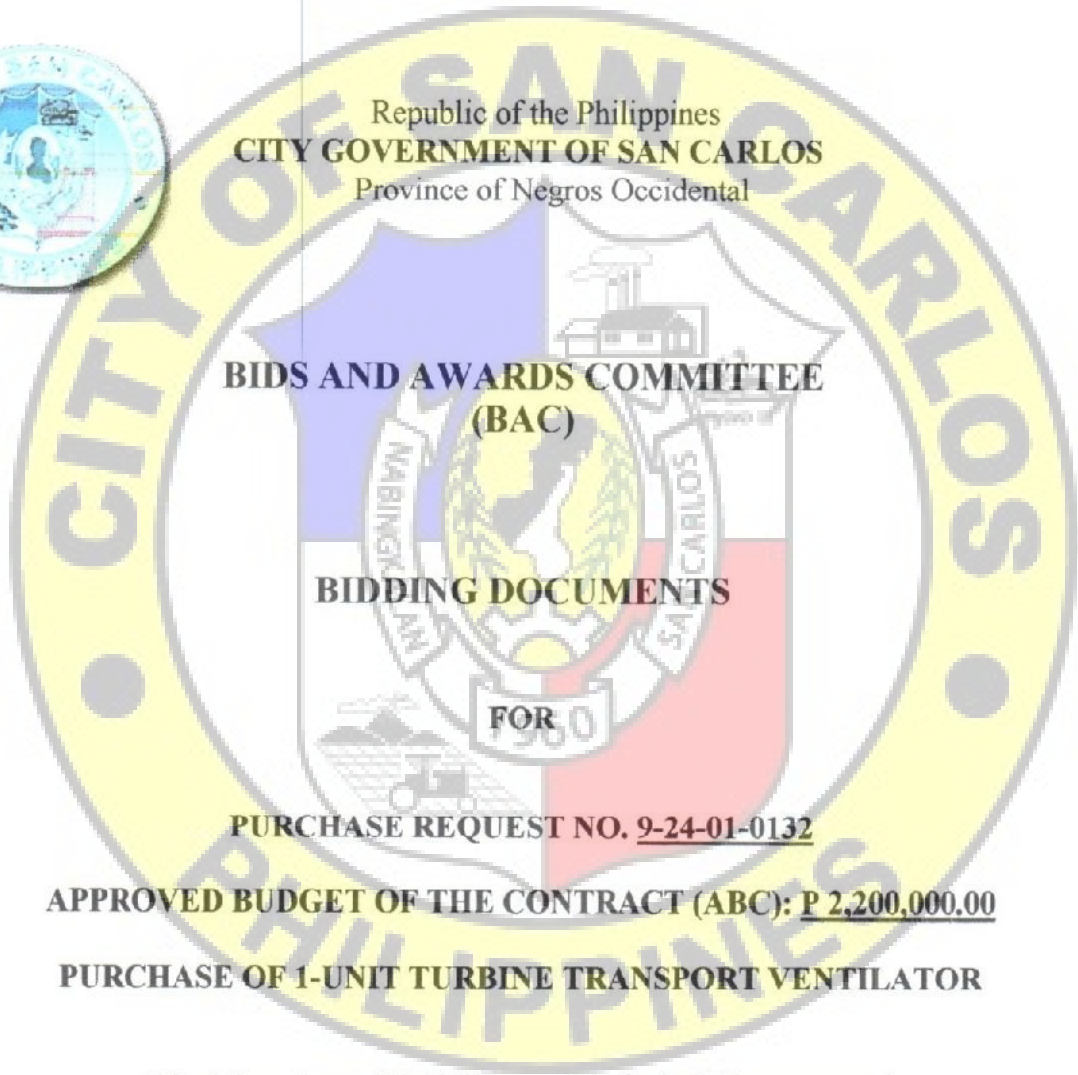




Republic of the Philippines
CITY GOVERNMENT OF SAN CARLOS
Province of Negros Occidental



**BIDS AND AWARDS COMMITTEE
(BAC)**

BIDDING DOCUMENTS

PURCHASE REQUEST NO. 9-24-01-0132

APPROVED BUDGET OF THE CONTRACT (ABC): P 2,200,000.00

PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

(First Envelope: Eligibility and Technical Components)

SUBMITTED BY : _____

ADDRESS : _____

CONTACT NO. : _____

EMAIL AD : _____

DATE OF SUBMISSION

INSTRUCTIONS TO BIDDERS

1. Please submit sets of documents completely in two separate envelopes:
The *First Envelope (Original, Copy 1 and Copy 2)* containing Eligibility & Technical Documents and the *Second Envelope (Original, Copy 1 and Copy 2)* containing Financial Documents.
2. Check that all annexes are in accordance with the prescribed format and submit in chronological order. Non-compliance is ground for disqualification.
3. Submit your completed bid documents on or before the time of the opening of bids mentioned below.
4. Electronic submission and receipt of bids is not available pending compliance with GPPB Resolutions.

Compliance of the above is for mutual advantage, i.e. to facilitate a complete and thorough evaluation of your bid documents.

SCHEDULES

Schedule/Place of Pre bid Conference:

February 22, 2024 @ 8:30 AM
BAC Secretarial Office
2F City Hall Building

Schedule/Place of Bid Opening:

March 5, 2024 @ 1:30 PM
BAC Secretarial Office
2F City Hall Building

Nonrefundable fee of Bidding Documents @ P 5,000.00

Bid and Awards Committee
City of San Carlos

Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

**1. PHILGEPS CERTIFICATION OF REGISTRATION AND MEMBERSHIP
IN ACCORDANCE WITH SECTION 8.5.2 OF R.A 9184 – PLATINUM
MEMBERSHIP**

**Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental**

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

2. JOINT VENTURE AGREEMENT (JVA), IF APPLICABLE

Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

**3. NET FINANCIAL CONTRACTING CAPACITY (NFCC) BASED ON THE DATA
SUBMITTED TO THE BIR THRU ITS EFPS OR COMMITTED LINE OF
CREDIT (CLCC) FROM A UNIVERSAL OR COMMERCIAL BANK**

**Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental**

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

- 4. DULY NOTARIZED STATEMENT OF ALL ON - GOING GOVERNMENT
AND PRIVATE CONTRACTS**

Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

5. DULY NOTARIZED STATEMENTS OF:

- A. AT LEAST ONE (1) COMPLETED SIMILAR CONTRACTS (GOVERNMENT OR PRIVATE) FOR THE LAST THREE (3) YEARS
- B. SINGLE LARGEST COMPLETED CONTRACT (SLCC) AT LEAST 50% OF THE ABC

Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

**6. LICENSE TO OPERATE (MEDICINES/DRUGS OR MEDICAL
SUPPLIES/DEVICE/EQUIPMENT) FROM FOOD AND
DRUG ADMINISTRATION**

Republic of the Philippines
Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

7. BID SECURITY

- a) Cash or cashier's / Manager's Check issued by a Universal or Commercial Bank in favor of City Treasurer of San Carlos City : Two percent (2%) of the ABC (See above)
- b) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank. Provided, however, that is shall be confirmed or authenticated by a Universal or Commercial Bank. : Two percent (2%) of the ABC (See above)
- c) Surety Bond callable upon demand issued by a surety or insurance company duly certified by the Insurance Commission as authorized to issue such security. : Five percent (5%) of the ABC (See above)
- d) Any combination of the foregoing : Proportionate to share form with respect
- e) Bid Securing Declaration (Please see Form Below)

REPUBLIC OF THE PHILIPPINES)
CITY OF SAN CARLOS, NEGROS OCCIDENTAL) S.S.

BID SECURING DECLARATION

Project Identification No. / Purchase Request (PR) No.: 9-24-01-0132

To: *[Insert name and address of the Procuring Entity]*

I/We, the undersigned, declare that:

1. I/We understand that, according to your conditions, bids must be supported by a Bid Security, which may be in the form of a Bid Securing Declaration.
2. I/We accept that: (a) I/we will be automatically disqualified from bidding for any procurement contract with any procuring entity for a period of two (2) years upon receipt of your Blacklisting Order; and, (b) I/we will pay the applicable fine provided under Section 6 of the Guidelines on the Use of Bid Securing Declaration, within fifteen (15) days from receipt of the written demand by the procuring entity for the commission of acts resulting to the enforcement of the bid securing declaration under Sections 23.1(b), 34.2, 40.1 and 69.1, except 69.1(f), of the IRR of RA No. 9184; without prejudice to other legal action the government may undertake.
3. I/We understand that this Bid Securing Declaration shall cease to be valid on the following circumstances:
 - a. Upon expiration of the bid validity period, or any extension thereof pursuant to your request;
 - b. I am/we are declared ineligible or post-disqualified upon receipt of your notice to such effect, and (i) I/we failed to timely file a request for reconsideration or (ii) I/we filed a waiver to avail of said right; and
 - c. I am/we are declared the bidder with the Lowest Calculated Responsive Bid, and I/we have furnished the performance security and signed the Contract.

IN WITNESS WHEREOF, I/We have hereunto set my/our hand/s this ____ day of *[month]* *[year]* at *[place of execution]*.

[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE]

[Insert signatory's legal capacity]

Affiant

Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

8. OMNIBUS SWORN STATEMENT

for

Purchase Request (PR) No. 9-24-01-0132

REPUBLIC OF THE PHILIPPINES)
CITY OF SAN CARLOS, NEGROS OCCIDENTAL) S.S

AFFIDAVIT

I, [Name of Affiant], of legal age, [Civil Status], [Nationality], and residing at [Address of Affiant], after having been duly sworn in accordance with law, do hereby depose and state that:

1. [Select one, delete the other:]

[If a sole proprietorship:] I am the sole proprietor or authorized representative of [Name of Bidder] with office address at [address of Bidder];

[If a partnership, corporation, cooperative, or joint venture:] I am the duly authorized and designated representative of [Name of Bidder] with office address at [address of Bidder];

2. [Select one, delete the other:]

[If a sole proprietorship:] As the owner and sole proprietor, or authorized representative of [Name of Bidder], I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for [Name of the Project] of the [Name of the Procuring Entity], as shown in the attached duly notarized Special Power of Attorney;

[If a partnership, corporation, cooperative, or joint venture:] I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for [Name of the Project] of the [Name of the Procuring Entity], as shown in the attached [state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate, Board/Partnership Resolution, or Special Power of Attorney, whichever is applicable)];

3. [Name of Bidder] is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board, by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting;

4. Each of the documents submitted in satisfaction of the bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;

5. [Name of Bidder] is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

6. [Select one, delete the rest.]

[If a sole proprietorship:] The owner or sole proprietor is not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

[If a partnership or cooperative:] None of the officers and members of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

[If a corporation or joint venture:] None of the officers, directors, and controlling stockholders of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. *[Name of Bidder]* complies with existing labor laws and standards; and
8. *[Name of Bidder]* is aware of and has undertaken the responsibilities as a Bidder in compliance with the Philippine Bidding Documents, which includes:
 - a. Carefully examining all of the Bidding Documents;
 - b. Acknowledging all conditions, local or otherwise, affecting the implementation of the Contract;
 - c. Making an estimate of the facilities available and needed for the contract to be bid, if any; and
 - d. Inquiring or securing Supplemental/Bid Bulletin(s) issued for the *[Name of the Project]*.
9. *[Name of Bidder]* did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.
10. **In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.**

IN WITNESS WHEREOF, I have hereunto set my hand this ___ day of ___, 20__ at _____, Philippines.

[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE]
[Insert signatory's legal capacity]
Affiant

[Jurat]
[Jurat shall be based on the latest Rules on Notarial Practice]



PURCHASE REQUEST NO. 9-24-01-0132

APPROVED BUDGET OF THE CONTRACT (ABC): P 2,200,000.00

PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

(Second Envelope: Financial Component)

SUBMITTED BY : _____
ADDRESS : _____
CONTACT NO. : _____
EMAIL AD : _____

DATE OF SUBMISSION



INSTRUCTIONS TO BIDDERS

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**Bid and Awards Committee
City of San Carlos**

**Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental**

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

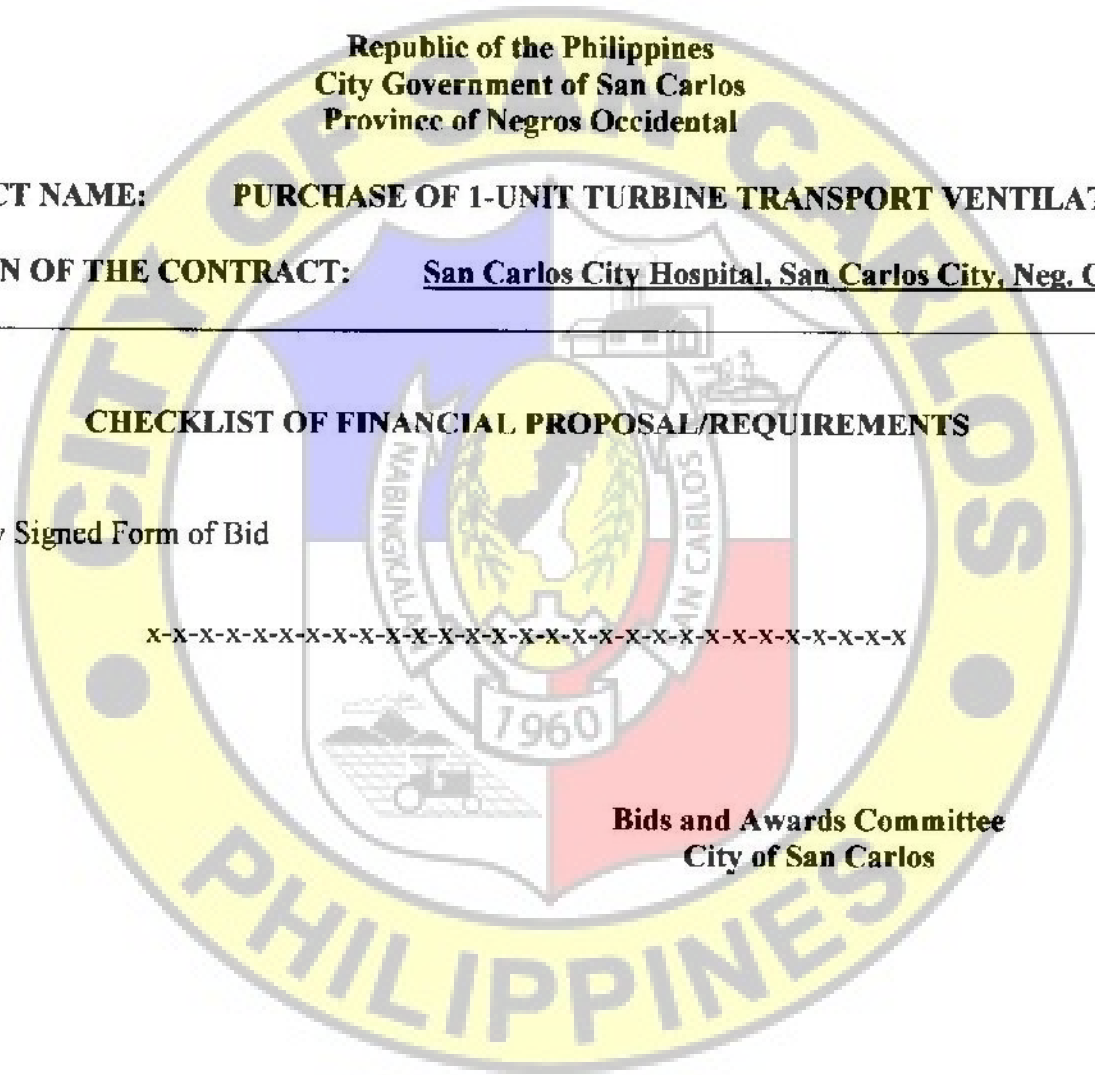
LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

CHECKLIST OF FINANCIAL PROPOSAL/REQUIREMENTS

1. Duly Signed Form of Bid

x-x

**Bids and Awards Committee
City of San Carlos**



**Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental**

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

1. DULY SIGNED FORM OF BID

Date: _____

Project Identification / Purchase Request No.: 9-24-01-0132

To: *[name and address of Procuring Entity]*

Having examined the Philippine Bidding Documents (PBDs) including the Supplemental or Bid Bulletin Numbers *[insert numbers]*, the receipt of which is hereby duly acknowledged, we, the undersigned, offer to *[supply/deliver/perform]* *[description of the Goods]* in conformity with the said PBDs for the sum of *[total Bid amount in words and figures]* or the total calculated bid price, as evaluated and corrected for computational errors, and other bid modifications in accordance with the Price Schedules attached herewith and made part of this Bid. The total bid price includes the cost of all taxes, such as, but not limited to: *[specify the applicable taxes, e.g. (i) value added tax (VAT), (ii) income tax, (iii) local taxes, and (iv) other fiscal levies and duties]*, which are itemized herein or in the Price Schedules,

If our Bid is accepted, we undertake:

- a. to deliver the goods in accordance with the delivery schedule specified in the Schedule of Requirements of the Philippine Bidding Documents (PBDs);
- b. to provide a performance security in the form, amounts, and within the times prescribed in the PBDs;
- c. to abide by the Bid Validity Period specified in the PBDs and it shall remain binding upon us at any time before the expiration of that period.

[Insert this paragraph if Foreign-Assisted Project with the Development Partner:

Commissions or gratuities, if any, paid or to be paid by us to agents relating to this Bid, and to contract execution if we are awarded the contract, are listed below:

Name and address Of agent	Amount Currency	Purpose of Commission or gratuity
------------------------------	--------------------	--------------------------------------

(if none, state "None") /

Until a formal Contract is prepared and executed, this Bid, together with your written acceptance thereof and your Notice of Award, shall be binding upon us.

We understand that you are not bound to accept the Lowest Calculated Bid or any Bid you may receive.

We certify/confirm that we comply with the eligibility requirements pursuant to the PBDs.

The undersigned is authorized to submit the bid on behalf of *[name of the bidder]* as evidenced by the attached *[state the written authority]*.

We acknowledge that failure to sign each and every page of this Bid Form, including the attached Schedule of Prices, shall be a ground for the rejection of our bid.

Name: _____

Legal capacity: _____

Signature: _____

Duly authorized to sign the Bid for and behalf of: _____

Date: _____

**Republic of the Philippines
City Government of San Carlos
Province of Negros Occidental**

CONTRACT NAME: PURCHASE OF 1-UNIT TURBINE TRANSPORT VENTILATOR

LOCATION OF THE CONTRACT: San Carlos City Hospital, San Carlos City, Neg. Occ.

Project Identification / Purchase Request No.: 9-24-01-0132

ITEM NO.	UNIT	ITEM DESCRIPTION	QTY.	UNIT COST	TOTAL COST
1	unit	Turbine Transport Ventilator	1		
		Inclusions:			
		1 pc Internal Battery			
		1 pc External Power Supply			
		1 pc Oxygen Cell			
		1 pc Single Use patient circuit for adult			
		1 pc High Flow Oxygentherapy (HFOT)			
		1 pc active humidifier			
		1 pc hepa filter			
		1 pc bacteriological filter			
		1 pc user manual			
		1 pc electric plug			
		1 pc Diameter Index Safety System gas			
		1 pc Fittings			
		1 pc carry bag			
		1 pc autoclavable EVA expiratory valve (with membrane)			
		1 pc autoclavable expiratory flow sensor			
		1 pc annual maintenance kit			
		free installation			
		free training			
		with 2 years warranty on service and parts			
		60 months warranty on turbine			
		Specs:			
		Display Technology: Colored LCD or LED, Touch Screen			
		Display size: must not exceed 9.0 inches			
		LED Backlight, adjustable brightness day and night display			
		can do 180 degrees display orientation			
		Input voltage: 100 - 240 V AC			
		Electrical Consumption: 115 VA			
		Battery: LiOn Rechargeable, Internal and external battery at least 2.3 hours per battery or 5 hours in standard adult ventilation			
		Ventilation Types: Volume Controlled, Pressure Controlled, Pressure Support, Spontaneous			
		Ventilation Modes: Volume Controlled Ventilation (VCV), Pressure Controlled Ventilation (PCV), Synchronized Intermittent Mandatory Ventilation (SIMV), Pressure Support Ventilation (PSV), Pressure Support Ventilation/Non-invasive Ventilation (PSV/NIV), COntinuous Positive Airway Pressure (CPAP), DUO LElvel (volume and pressure), PS-Pro Intuitive Pressure Support Ventilation, PSIMV/PSIMV-VNI, PRVC as optional, High Flow Oxygen Therapy (HFOT)			
		Emergency Modes: Automatic Ventilation parameter base on patient ideal body weight for both infants and adults, automatic leak detection and compensation			
		Patient Categories: Adult/Infant			
		Patient Weight: Adjustable base on Ideal Body Weight			
		Tidal Volume: 50 to 2000ml			
		Frequency: 1 to 60 BPM			
		PEEP: 0 to 20 cmH20			
		FiO2: 21 to 100%			
		(continuation next page)			

	I:E Ratio: 10 to 50% of total time
	Inspiratory time: 0.3 to 5 sec
	Inspiratory Flow rate Trigger: Deactivated 0.5 to 10 l/min
	Inspiratory Pressure: 5 to 60 cmH2O
	Pressure Support: 5 to 60 cmH2O
	Rise Time: 50 to 120 cmH2O
	P. Max: 80 cmH2O
	P. Limit: 90 cmH2O
	Expiratory trigger: 10 to 90% of Peak Flow
	Peak Flow: 5 to 150 l/min volumetric mode, 230 l/min in spontaneous mode
	Inspiratory and Expiratory Pause: 0 to 15 sec
	Trends: at least 80 hours
	Adjustable users alarms: high pressure, Vti low/high, Mvi low/high, MVE low/high, Vte low/hogh, Frequency low/high, FIO2 low/high and CO2 low/high
	Other alarms: Disconnection, Expiratory Obstruction, Flow Sensor, Power Supply, Battery, Gas Inlet and Patient Pre-Oxygenation, Visible Alarm
	Adjustable Volume: Four (4) Critical Levels
	Apnea Ventilation: Adjustable Apnea Ventilation Volume, Frequency and Duration
	Gas Fittings: DISS, NIST, NF
	O2 Pneumatic Supply: 2.8 - 6 bar/ 280 - 600 kPa/ 40 - 86 psi (HP)
	O2 low pressure: 0 - 1.5 bar/0 - 150 kpa/0-22 psi (LP)
	Air Supply: Integrated Turbine with 5 years warranty of 15,000 hours operation
	Operating Temperature: -10°C to +40°C
	Relative Humidity: 0 - 95% without condensation at 40°C max
	Atmospheric Pressure: 600 to 1150 hPa
	Protection Index: IP34 (water spray protection from all sides)
	Safety: Screen Lock
	Quality Standard Certification: NF EN ISO 14971:2001 and A1:2003, CEI 60601-1:2000, CEI 60601-1-2:2007, CEI 60601-2-12:2001, NF EN 794-3:1998, A1:2005 A2:2009, NF EN 1789:2010 section 6.3 and 6.4, Air ambulance (Helicopter and Airplane) EN13718-1 (including RTCA DO160G)
	Accessories: Carry Bag, Universal Hook, USB Port for data transfer and event log, Connectivity to HIS
	Patient Circuit and Humidifier: Non-exclusive, can be used with standard two limb breathing circuits
	*** nothing follows ***

NOTE:

1. Delivery Term: 60 Working Days

Submitted by:

Date: _____

Signature Over Printed Name of the Representative of the Bidder

Position

Name of Company