



MINUTES OF THE PRE-BID CONFERENCE
15 September 2026 @ 1:00 pm
Public Bidding VMC No. 2026-069
SUPPLY, DELIVERY, INSTALLATION, ACCEPTANCE TESTING, AND COMMISSIONING OF
VARIOUS MEDICAL EQUIPMENT FOR OB-GYN, DELIVERY ROOM AND PEDIATRICS – BATCH 5

Present during the meeting were as follows:

BIDS & AWARDS COMMITTEE:

Ms. Ruby S. Gurrea – Chairperson
Engr. Zoraida S. Cuadra – Vice Chairperson
Dr. Maria Concepcion Isberto – BAC Member
Mr. Rolando Saoi – BAC Member
Dr. Edilberto V. Cavaneyro – Provisional Member

BAC SECRETARIAT:

Ms. Ligaya E. Ubalde – Head, BAC Secretariat
Ms. Kristine Joy Manuel – In-charge
Ms. Angelita B. Dayego
Ms. Aileen C. Pacheco
Ms. Aileen S. Cali
Ms. Kezia Therese M. Guevarra
Ms. Diana Pulido
Mr. Lester John Jake R. Divino

PROSPECTIVE BIDDER/S:

Ms. Daisy Caburian – RG MEDITRON INC.
Ms. Racquel Anne Reduta – Dunamed Healthcare Inc.
Ms. Kayreen Menor – Toyo Adtec Hhealthhcare Products Inc
Ms. Rona Porio – Metromed Distributors Inc.
Mr. Ricky Miranda - Sanitas

OBSERVER/TWG/END-USER:

Mr. Roderick Balagtas – Observer, Proc. Section
Ms. Monina Nicolas – MO IV
Engr. Gerardo E. Lingat – Engineer III
Mr. Percieval Mariano – Nurse III
Ms. Corazon A. Blaza – End-user, DR
Ms. Rizza Daez – MO IV

Ms. Esperanza Chiong - TWG
Mr. Jeriel Robert Dating - TWG
Mr. Raymund Joe Macuana – Observer, Acctnt IV
Ms. Rufina Vadil – Observer, Budget Section

CALL TO ORDER:

The conference started at 1:00 pm and was presided by **Ms. Ruby S. Gurrea**, Chairperson of Bids & Awards Committee (BAC), held at the BAC Office, 2nd Floor, Admin Building, Valenzuela Medical Center, Padrigal St., Karuhatan, Valenzuela City. She acknowledged the presence of all representatives of each prospective bidder, the members of the BAC, BAC Secretariat, TWG as well as the invited observers. She reminded everyone that the Committee strictly adheres to Republic Act No. 12009 and its Implementing Rules and Regulations or the New Government Procurement Act.

PROJECT DESCRIPTION:

PROJECT TITLE:	SUPPLY, DELIVERY, INSTALLATION, ACCEPTANCE TESTING, AND COMMISSIONING OF VARIOUS MEDICAL EQUIPMENT FOR OB-GYN, DELIVERY ROOM AND PEDIATRICS – BATCH 5
PB No.	VMC-2026-069
Bid Opening	September 29, 2026, at 9:00 am
Approved Budget for the Contract (ABC)	P 14,560,333.33
Source of Fund	General Fund
Implementing Unit	OB-GYN/DELIVERY ROOM/PEDIATRICS
Delivery Schedule	60 Calendar Days
Amount of Bidding Documents	See ITB
Criteria	Lowest Calculated ad Responsive Bid (LCRB)

BUSINESS MATTERS:

The BAC discussed the requirements as stated in the Bidding Documents, the eligibility requirements and technical and financial components of the procurement project, including questions, clarifications raised by the bidders before and during the pre-bid conference. (Section 51)

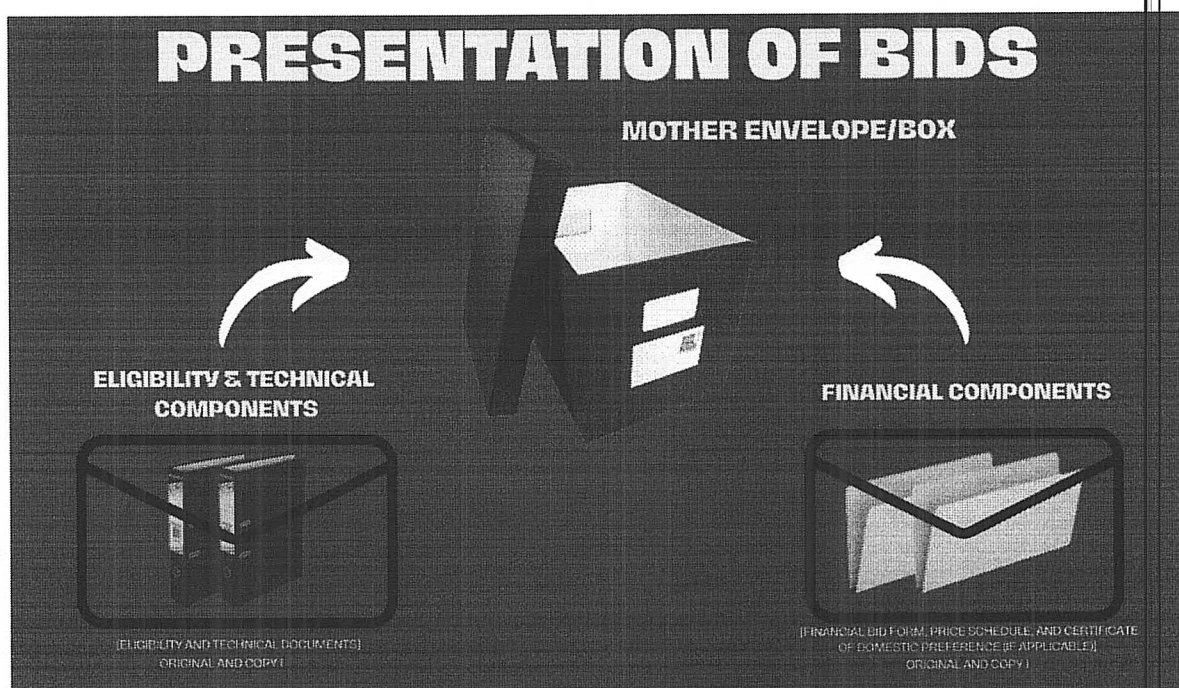
- In accomplishing the Technical Specifications and Schedule of Requirements kindly follow the following:
 - a. Indicate your **OFFER** in the "Statement of Compliance" column and put the word "Comply" after the BIDDER's specifications.
 - b. If with variance or discrepancy in the VMC specifications, please indicate your offer in accordance with the brochure submitted, if applicable
- Bid Security will be forfeited if withdrawn during the validity period.
- Forms as mentioned in ITB Clause 17.1 must be completed without any alterations to their format. No substitute form shall be accepted. (ITB Clause 17.2)
- Each and every page of the Bid Form, including the Price Schedule, under Section VIII hereof, shall be signed by the duly authorized representative/s of the Bidder. Failure to do so shall be a ground for the rejection of the bid. (ITB Clause 17.3)
- Any insertions, erasures, or overwriting shall be valid only if they are signed or initialed by the duly authorized representative/s of the Bidder. (ITB Clause 17.4)
- Any document or certification issued outside Philippines should be authenticated through an apostille by the Competent Authority, as defined in Section 20.9.2 of this IRR, except for countries identified by the DFA that will still require legalization (red ribbon) by the relevant Embassy or Consulate. (Section 52.3 of RA 12009 and its IRR)
- Notice of Award will be emailed using the official email address indicated in the attendance during bid opening to winning bidders. The following day will be counted as 1st day of receipt.
- Modification of Bid is strictly prohibited. The description stated in the bid offer will be followed and cannot be amended
- Request of delivery extension before due date indicated in the approved Purchase Order is subject for approval of the Implementing Unit (IU).

PRESENTATION OF BIDS:

Sealing and Marking of Bids (Section 18 of Bidding Documents)

- Bidders shall enclose their technical documents described in ITB Clause 12 in one sealed envelope marked "TECHNICAL COMPONENT", and the financial component in another sealed envelope marked "FINANCIAL COMPONENT", sealing them all in an outer envelope marked "BID".
- The Bid as indicated in the Bidding Documents shall be typed or written in ink and shall be signed by the Bidder or its duly authorized representative/s.
- All envelopes shall: (18.3)
 - a. contain the name of the contract to be bid in capital letters;
 - b. bear the name and address of the Bidder in capital letters;
 - c. be addressed to the Procuring Entity's BAC in accordance with ITB Clause 1.1;
 - d. bear the specific identification of this bidding process indicated in the ITB Clause 1.1;
 - e. bear a warning "DO NOT OPEN BEFORE..." the date and time for the opening of bids, in accordance with ITB Clause 19.
- Bidders shall submit their bids through their duly authorized representatives using the forms specified in the Bidding Documents in two (2) separate sealed envelopes, which shall be submitted simultaneously.

- Bidders shall enclose the "Original" and "Copy 1" of their Eligibility and Technical Documents in a separate envelope marked ELIGIBILITY and TECHNICAL COMPONENTS. The "Original" and "Copy 1" of their Financial Documents (Bid Form, Bid Offer & others) shall be enclosed in a separate envelope marked FINANCIAL COMPONENTS.
- These 2 envelopes shall be enclosed in any sealed box (preferably Data File Box) with a cover.
- No color preference for the Folders and Boxes.
- **All documents to be submitted as part of the Bid should be arranged in chronological order based in the Checklist provided by the BAC. Further, all bid proposals should be ring bound and tabulated in words. Failure to follow instructions will mean disqualification.**



➤ **Documents Comprising the Bid: Technical and Financial Components**

I. TECHNICAL COMPONENT ENVELOPE including Eligibility Documents – 1st Envelope

- Valid PhilGEPS Registration Certificate (Platinum Membership) (all pages) in accordance with Section 20 of the IRR;
- Statement of Single Largest Completed Contract (SLCC) similar to the contract to be bid, except under conditions provided for in Section 52.4.1.3. of the New IRR of RA No. 12009, within the relevant period as provided in the Bidding Documents; **and**
 - Amount of the completed contract should be fifty percent (50%) of the total ABC of the Project.
 - Aggregated contracts are not allowed.
- Computation of Net Financial Contracting Capacity (NFCC); **or** A committed Line of Credit in the case of goods or services; **and**
- Statement of all its ongoing government and private contracts, including contracts awarded but not yet started, if any, whether similar or not similar in nature and complexity to the contract to be bid; **and**
- If applicable, a duly signed joint venture agreement (JVA) in case the joint venture is already in existence; **or** duly notarized statements from all the potential joint venture partners stating that they will enter into and abide by the provisions of the JVA in the instance that the bid is successful.
- Bid Security in the prescribed form and amount in accordance with ITB Clause 16, and validity period under ITB Clause 15 Original copy of Bid Security

- Bid Securing Declaration or any form of bid security in accordance with Section 56.2 of the IRR of RA 12009 or the New Government Procurement Act
- g. Technical Specifications, which may include production/delivery schedule, manpower requirements, and/or after-sales service or parts, if applicable; **and**
- h. Original copy of Omnibus Sworn Statement (OSS); **and** accompanied by Original Notarized Secretary's Certificate in case of a corporation, partnership, or cooperative; or Original Notarized Special Power of Attorney in the case of Single Proprietorship;
- i. Declaration of Beneficial Ownership or General Information Sheet in case of corporations, partnerships, private sector organizations, foundations and associations;

In case of Sole Proprietorship, updated General Information Sheet or any equivalent document.
- j. For foreign Bidders claiming eligibility by reason of their country's extension of reciprocal rights to Filipinos, a certification from the relevant government office of their country stating that Filipinos are allowed to participate in their government procurement activities for the same item or product.

II. **Financial Component Envelope – 2nd Envelope**

- j. Original of duly signed and accomplished Financial Bid Form;
- k. Original of duly signed and accomplished Price Schedule(s) in accordance of ITB Clause 13.1.
- l. Certification from the DTI if the Bidder claims preference as a Domestic Bidder or Domestic Entity. (If applicable)

ADDITIONAL REQUIRED DOCUMENTS (to be submitted during Post – Qualification Evaluation)

1. CTC copy of Official Receipt as proof of payment of bidding documents.
2. Registration certificate from Securities and Exchange Commission (SEC), Department of Trade and Industry (DTI) for sole proprietorship, or Cooperative Development Authority (CDA) for cooperatives or its equivalent document. All pages including Declaration of Beneficial Ownership
3. Mayor's or Business permit issued by the city or municipality where the principal place of business of the prospective bidder is located, or the equivalent document for Exclusive Economic Zones or Areas.
4. Tax clearance per E.O. No. 398, s. 2005, as finally reviewed and approved by the Bureau of Internal Revenue (BIR).
5. The Supplier's audited financial statements, showing, among others, the Supplier's total and current assets and liabilities, stamped "received" by the BIR with 2025 ITR or its duly accredited and authorized institutions, for online submission, an email confirmation from BIR for the preceding calendar year which should not be earlier than two (2) years from the date of bid submission
6. Certificate of **Good Performance** issued by the Procuring Entity of the Bidder **with at least Satisfactory Rating** - CY 2025 to present
7. For SLCC - Proof of evidence for Single Largest Completed Contract (SLCC) – Purchase Order or NOA, Sales Invoice, Official Receipt and Certificate of Completion and Acceptance. **At least 50% of total ABC.** Aggregated contracts are not allowed.
8. Certificate from the manufacturer to distribute their products or Exclusive Distributorship or any equivalent document
9. License to Operate (LTO) from FDA
10. Brochures/Data Sheets
11. Other Certificates that need to be presented during post-qualification stated in the Technical Specifications/Bidding Documents.

REVIEW OF TECHNICAL SPECIFICATIONS:

ITEM NO.	ITEM DESCRIPTION	QTY.	UOM	LOT PRICE	TOTAL LOT AMOUNT	AMENDMENT
1	Supply, Delivery, Installation, Acceptance, Testing and Commissioning of Obstetrical Table	4	unit	590,000.00	2,360,000.00	
	Technical Specifications:					
	Material Structure: Main frame, base cover, accessories siderails, Fluid collection basin must be hospital grade Stainless steel					
	Length of Table Top: 1800 to 1840 mm					
	Width of Table Top: 580 to 620 mm					
	Minimum Height of Table Top: 760 to 800 mm					
	Maximum Height of Table Top: 980 to 1020 mm					
	Forward Titling of Table Body: $\geq 20^\circ$					
	Backward Titling of Table Body: $\geq 20^\circ$					
	Upward Turning able of the Back Board: $\geq 55^\circ$					
	Powered by electrical motors with dual options (electrical foot pedal and hand controller)					
	-Upward turning					
	-Backward tilting					
	-Forward tilting					
	-Adjustable back board					
	Weight Capacity: minimum of 200 kgs.					
	Accessories:					
	-One (1) set consisting of three (3) individual mattresses. Material: -high density sponge (foam) with leather coating for easy disinfection -thickness: 3-4"					
	One (1) pair of Knee Crutches					
	One (1) unit of IV Pole with 4 hooks, stainless					
	With Electric Push Rod					
	One (1) pair of Arm Rest Board with reusable strap (Standard: Adult size) Material: -high density sponge (foam) with leather coating for easy disinfection					
	One (1) pair Leg Support Stirrups with reusable strap (Standard: Adult size) Material: -high density sponge (foam) with leather coating for easy disinfection					
	Hand and Foot Pedal Controller					
	One (1) Hospital Grade Power					

	Cable 3 prong (at least 5 meters)						
	With catch basin/slide out tray, stainless steel at least 4 liters capacity						
	ELECTRICAL REQUIREMENTS						
	Equipment shall compatible with hospital power supply of 220 to 240VAC, single phase, 60Hz with grounding						
	With compatible Uninterruptible Power Supply (UPS) with voltage regulation function that can provide back-up power at least 30 minutes						
	GENERAL REQUIREMENTS						
	Certification that needs to be presented during Post-Qualification:						
	With valid FDA Certificate of Medical Device Notification (CMDN)/Certificate of Medical Device Registration (CMDR) or pending renewal at least one (1) month before expiration Submit the following as proof of renewal application: - Proof of payment - Acknowledgement Receipt (e.g. FDA DocTrack)						
	The equipment or devices shall conform to the IEC 60601 (Medical Electrical Safety Standards) or its internationally recognized equivalent.						
	The manufacturer of the medical equipment shall possess a valid ISO 13485 Certification (Medical Devices – Quality Management System) or its localized national equivalent.						
	The manufacturer of the medical equipment shall comply with ISO 14971 (Risk Management for Medical Devices) or its localized national equivalent.						
	Training certificate from manufacturers of field service engineers / technician performing Preventive and Corrective Maintenance Services						
	Manufacturer's Certificate that the brand has been established in the local market for a minimum of ten (10) years.						
	Certification that there is established Service Center within Metro Manila, state the name, address and contact details of the establishment						
	Certificate of Comprehensive Warranty which states the following clause: a. The period of warranty shall						

	be deemed to be fully comprehensive b. All inclusive of warranty, labor, spare parts, accessories, service consumables, manufacturer's Preventive Maintenance						
	Certificate for the Cost of Preventive Maintenance Program for equipment after warranty period up to 5 years. Price validity of 5 years upon delivery of equipment						
	Certificates to be submitted upon delivery:						
	Warranty and Preventive Maintenance Services:						
	Two (2) years comprehensive warranty on parts and services for equipment						
	Two (2) years warranty on parts and services for UPS						
	Certificate of availability of spare parts within ten (10) years						
	Certification that the 95% uptime of the product is within the warranty period and that any accumulated downtime in excess of 5% shall be added to the warranty period.						
	Submit Semi-Annual Preventive Maintenance Service Schedule during warranty period (include month and year)						
	Pricelist for major spare parts, accessories and consumables that is valid for 5 years.						
	Submit complete parts, accessories and consumables list with identification number or codes						
	Procedures to be performed upon delivery:						
	Comprehensive Training of End-User (Operation) with Certificate of Training should be provided and should contain the following details: a. Name of Trainee b. Modality, Brand, Model of Equipment c. Type of Training Conducted d. Inclusive Dates of the Training e. Name of Trainer, Date and Venue						
	The unit to be delivered must show proof that its manufacturing date must be CY 2025 onwards						
	Electrical Safety Test (IEC 62353)						
	Provide two (2) sets of colored Technical Manual, Hardcopy and Softcopy (Flashdrive) in English Manual for all						

	equipment including peripherals, UPS, etc. a. User's Operational Manual b. Quality and Maintenance Manual c. Service and Technical Manual d. Installation Manual						
	Comprehensive training for hospital biomedical engineers and unit head on maintenance and troubleshooting of all equipment and their accessories and peripherals						
	Hands-on Training for Biomedical Unit, suppliers must perform an actual: a. Operations b. Disassembly and Assembly c. Troubleshooting d. Recommended Maintenance as per manufacturer						
	OTHER TERMS & CONDITION:						
	Preferably with green eco-products specification (made of recyclable and non-toxic materials, energy efficient, sustainability, etc.)						
	Delivery: Sixty (60) calendar days from the date of receipt of Purchase Order						
2	Supply, Delivery, Acceptance, Testing and Commissioning of OB-GYN ULTRASOUND MACHINE	1	unit	11,650,000.00	11,650,000.00		
	General Specification:						
	Architecture: System Architecture System Processing Channel: Digital Beamformer with system processing channel technology Monitor: min. 23.8" high resolution Medical Grade LCD Display with HDMI interface Resolution: Full HD 1920 x 1080 pixel Aspect Ratio: 16:9 Image Size: Standard, XL, Full Screen						
	Fully Articulating Monitor Arm, Tilt angle: min. +25 deg /-68 deg, Tilt angle: min. +25°/-68° Rotate: +/- 90°, Rotate: +/- 90 deg Horizontal range of motion: >350 mm (13.7 in) Vertical range of motion: > 150 mm (5.9 in)						
	Touch Screen: min. 14 " High resolution color LCD screen						
	Resolution: Full HD 1920 x 1080 pixel, Aspect Ratio : 16:9						
	Operating System: Windows 10 or equivalent, or higher Enterprise 64 bit Integrated 1TB SSD						
	Probe Ports: 4 Active universal						

	pinless imaging probe ports (3std./ 1opt.)						
	External Connectors: HDMI, VGA port, Usb, USB 3.0 (4x) Type A USB 3.0 (2x) Type C						
	Application: Abdominal, Obstetrical and Fetal Echo, Gynecological Small Parts and Breast, Vascular Pediatrics Transrectal, Cardiology, Cephalic, Musculoskeletal (MSK)						
	Operating panel: Adjustable User Interface: • Rotation: adjustable +/- 30° from center • Height adjustable + 250 mm (9.8 in)						
	Floating Keyboard: 6 integrated probe holders including dedicated horiz Ergonomic hard key layout including trackballontal transvaginal probe holder 5 integrated probe holders with individual cable outlet plus 1 holder for transvaginal probe B-mode, M-Mode, CFM, Power Doppler; Volume mode (3D/4D) Combination modes: M/C, M/HD-Flow, M/TD, PW/C, PW/HD-Flow, PW/PD, PW/TD						
	Pulsed Wave Doppler (PW) with automatic HPRF, including duplex and triplex capabilities						
	Tissue Doppler Mode (TD) and PW-Tissue Doppler Mode						
	Peripheral: Gel holder Gel Warmer (Integrated in Probe Holders) B&W printer, medical grade (integrated in console) Color printer, medical grade						
	Special Features:						
	Biophysical Profile Clock						
	Non Doppler Blood Flow Imaging						
	Automated fetal biometry measurement tool						
	Automated Fetal Anatomy Recognition First and Second Trimester						
	Automated Image Analysis tool						
	Automated Labor Progress Analysis						
	Automated Fetal Cardiac Volume Analysis						
	Fetal Heart Screening						
	Advanced Static 3D/4D						
	Advanced Real Time Volume Rendering						
	Advanced Spatio Temporal Image Correlation /M-Mode and Color Flow Mode						
	Tomographic Ultrasound Slice						

	visualization Tool						
	HD Rendering (Advanced Volume Rendering)						
	Advanced 3D Color Doppler Volume Rendering						
	Volume Rendered Power Doppler Rendering						
	Advanced Volume Contrast Imaging Feature with Multiplanar Reconstruction						
	Advanced Volume Contrast Imaging Feature with Multiplanar Reconstruction						
	Elastography (Quantitative and Qualitative)						
	Pelvic Floor Assessment Automation						
	Gynecology AI Suite (Automatic 3D Fibroid detection and Mapping)						
	Advanced Follicle assessment, antral and general, Auto Calliper for follicles						
	Manual and Semi Automated Uterine Contour Tracing						
	GYN IOTA LR2, Simple Rules and ADNEX Model GYN IETA Protocol & Report, GYN IDEA Protocol & Scan Assistant Guideline						
	Battery Pack Option: Battery pack: up to 75 minutes scanning, extended up to 150 minutes scanning, longer in standby (Sleep)						
	Wireless Handheld Ultrasound Integration						
	Web Based Medical Image Management Software						
	Accessories:						
	Tranducers:						
	Wideband Convex Probe Applications OB, GYN 2-5MHz						
	Wideband Microconvex Probe applications OB, GYN, Transrectal 4-9 MHz						
	Wideband Microconvex Volume Probe Applications: OB GYN, Transrectal 4-9 MHz						
	Wideband Convex Volume Probe Applications Abdomen, OB, GYN, Transrectal 2-8 MHz						
	Wideband Linear Probe Applications Small Parts, Pediatrics, MSK, Vascular, Breast 4-10 MHz						
	Wireless Handheld Probe Wideband Linear & Curved Array Probe						

	Applications Abdomen, Vascular, Cardiology, Obstetrics and Gynecology, Pediatrics incl. Neonatal Cephalic, Musculoskeletal incl. Nerve, Small Parts, Interventional Weight 205+/-3g Curved -2-5 MHz Linear -3-12 MHz						
	General Requirement:						
	Electrical Specification:						
	Equipment shall compatible with hospital power supply of 220 to 240VAC, single phase, 60Hz with grounding						
	With compatible Uninterruptible Power Supply (UPS) with voltage regulation function that can provide back- up power at least 30 minutes						
	With Isolation Transformer that will be compatible to the unit.						
	Certification that needs to be presented during Post- Qualification:						
	With valid FDA Certificate of Medical Device Notification (CMDN)/Certificate of Medical Device Registration (CMDR) or pending renewal at least one (1) month before expiration Submit the following as proof of renewal application: - Proof of payment - Acknowledgement Receipt (e.g. FDA DocTrack)						
	The equipment or devices shall conform to the IEC 60601 (Medical Electrical Safety Standards) or its internationally recognized equivalent.						
	The manufacturer of the medical equipment shall possess a valid ISO 13485 Certification (Medical Devices – Quality Management System) or its localized national equivalent.						
	The manufacturer of the medical equipment shall comply with ISO 14971 (Risk Management for Medical Devices) or its localized national equivalent.						
	Training certificate from manufacturers of field service engineers / technician performing Preventive and Corrective Maintenance and Calibration Services						
	Manufacturer's Certificate that the brand has been established in the local market for a minimum of ten (10) years. At least five (5) documentary proof of supply to hospitals or public healthcare institutions					Manufacturer's Certificate that the brand has been established in the local market for a minimum of ten (10) years.	

	shall be submitted, such as a purchase order, sales invoice, proof of delivery, or other equivalent supporting document acceptable to the procuring entity.						
						At least five (5) documentary proof of supply to hospitals or public healthcare institutions shall be submitted, such as a purchase order, sales invoice, proof of delivery, or other equivalent supporting document acceptable to the procuring entity	
	The bidder/manufacturer shall submit a valid certification and complete address details confirming the existence of an established and operational service center in Metro Manila with corresponding names, contact number and email address						
	Certificate of Comprehensive Warranty which states the following clause: a. The period of warranty shall be deemed to be fully comprehensive b. All inclusive of warranty, labor, spare parts, accessories, service consumables, manufacturer's Preventive Maintenance						
	Certificate for the Cost of Preventive Maintenance and Calibration Program for equipment after warranty period up to 7 years. Price validity of 7 years upon delivery of equipment						
	Certificates to be submitted upon delivery:						
	Warranty and Preventive Maintenance Services:						
	Five (5) years comprehensive warranty on parts and services for equipment						
	Three (3) years warranty on parts and services for UPS, Isolation Transformer and Printer						
	Certificate of availability of spare parts within ten (10) years						
	Certification that the 95% uptime of the product is within the warranty period and that any accumulated downtime in excess of 5% shall be added to						

	the warranty period.						
	Submit Quarterly Preventive Maintenance Schedule and Annual Calibration Service Schedule during warranty period (include month and year)						
	Calibration Report from the Manufacturer or Verification Report from the Supplier (2 copies, 1 copy for MMS and 1 for EFMS)						
	Certification that the bidder will provide a Service Unit that the end-user can use in case the equipment or any system component will be pulled-out for repair or maintenance within the warranty period.						
	Pricelist for major spare parts, accessories and consumables that is valid for 7 years.						
	Submit complete parts, accessories and consumables list with identification number or codes						
	Free software upgrades and updates (security, revision updates) for all Clinical and Technical applications during the period of warranty.						
	Procedures to be performed upon delivery:						
	Comprehensive Training of End-User (Operation) with Certificate of Training should be provided and should contain the following details: a. Name of Trainee b. Modality, Brand, Model of Equipment c. Type of Training Conducted d. Inclusive Dates of the Training e. Name of Trainer, Date and Venue						
	The unit to be delivered must show proof that its manufacturing date must be CY 2025 onwards						
	Verification and Acceptance Testing: The supplier shall perform comprehensive functional and image quality verification testing on-site. This testing must utilize a standardized ultrasound phantom test tool to evaluate axial/lateral resolution, depth of penetration, and distance accuracy. The entire testing procedure must be physically witnessed and formally signed off by both the end-user clinical representative and a VMC Medical Equipment Technician prior to final acceptance.						

	Electrical Safety Test (IEC 62353)						
	Provide two (2) sets of colored Technical Manual, Hardcopy and Softcopy (Flashdrive) in English Manual for all equipment including peripherals, UPS, etc. a. User's Operational Manual b. Quality and Maintenance Manual c. Service and Technical Manual						
	Comprehensive technical training for hospital biomedical engineers and unit head on maintenance and troubleshooting of all equipment and their accessories and peripherals						
	Hands-on Training for Biomedical Unit, suppliers must perform an actual: a. Operations b. Dissassembly and Assembly c. Troubleshooting d. Recommended Maintenance as per manufacturer						
	Other Terms & Condition:						
	Preferably with green eco-products specification (made of recyclable materials, non-toxic materials, energy efficient, sustainability, etc.)						
	Delivery: Sixty (60) calendar days from the date of receipt of Purchase Order (PO)						
3	Supply, Delivery, Acceptance, Testing and Commissioning of ULTRALOW TEMPERATURE FREEZER	1	unit	550,333.33	550,333.33		
	Features						
	Color: White or Gray						
	> Clear LED screen and control panel support easy display and operation.						
	> Lockable universal caster wheels.						
	> Drawer design makes separated storage possible.						
	> Eco friendly CFC-free refrigerant also save energy.						
	> Coil evaporator for better performance & easy maintenance.						
	> Upright side swing door with build-in handle for easy-opening; limit door hinge to prevent collision when door open.						
	Features						
	> Audible and visible alarm: high and low temperature, sensor error, power off, temperature controller malfunction, door ajar alarm.						
	> Power failure protect: Device						

	could be attacked by the high current when all devices in the lab restart, start-delay function would protect device from the damage.						
	Technical Specifications						
	> Capacity(L): 358						
	Internal size: 466mm(W) x 636mm(D) x 625mm(H)						
	External size: 720mm(W) x 830mm(D) x 1870mm(H)						
	>Temperature:						
	*Range at RT. (10 ~ 32°C): -10 ~ -25°C						
	*Sensor: NTC						
	*Controller: Microprocessor						
	>Cooling System:						
	*Refrigerant (CFC Free): R290						
	*Defrost: Manual					*Defrost: Manual (Preferably no frost)	
	>Display: Digital display						
	> Audible & Visible Alarm:						
	*High / Low temp: Standard						
	*High ambient temp: Standard						
	*Sensor Error: Standard						
	*Door ajar: Standard						
	*Power failure backup system(alarm): 8h						
	>Material:						
	*Internal: Electro-galvanized steel with antimicrobial powder coating						
	*External: Electro-galvanized steel with antimicrobial powder coating						
	>Accessories						
	*USB port: Standard						
	*Casters: Standard						
	*Data Logger: Optional						
	*Remote alarm port: Standard						
	*Test hole(Qty): 2/ Ø25mm						
	>Shelves / Drawers (Qty): Shelves/4, Drawers/12						
	>Sound Emission (dB): up to 49						
	Electrical Requirements:						
	Equipment shall compatible with hospital power supply of 220 to 240VAC, single phase, 60Hz with grounding						
	Equipped with a compatible, heavy-duty one (1) unit of Automatic Voltage Regulator (AVR) with a capacity at least 50% higher than the maximum startup/surge wattage and time delay feature, or as recommended by the equipment manufacturer						
	General Requirements:						

	Certification that needs to be presented during Post-Qualification/Evaluation:						
	With valid FDA Certificate of Medical Device Notification (CMDN)/Certificate of Medical Device Registration (CMDR) or pending renewal at least one (1) month before expiration Submit the following as proof of renewal application: - Proof of payment - Acknowledgement Receipt (e.g. FDA DocTrack)						
	The equipment or devices shall conform to the IEC 60601 (Medical Electrical Safety Standards) or its internationally recognized equivalent.						
	The manufacturer of the medical equipment shall possess a valid ISO 13485 Certification (Medical Devices – Quality Management System) or its localized national equivalent.						
	The manufacturer of the medical equipment shall comply with ISO 14971 (Risk Management for Medical Devices) or its localized national equivalent.						
	Manufacturer's Certificate Brand must be in the local market for at least 10 years						
	Certification that there is established Service Center within Metro Manila, state the name, address and contact details of the establishment						
	Certificate of Comprehensive Warranty which states the following clause: a. The period of warranty shall be deemed to be fully comprehensive b. All inclusive of warranty, labor, spare parts, accessories, service consumables, manufacturer's Preventive Maintenance						
	Certificates to be submitted upon delivery:						
	Warranty and Preventive Maintenance Services:						
	Two (2) years comprehensive warranty on parts and services for equipment						
	One (1) year warranty on parts and services for AVR						
	Certificate of availability of spare parts within ten (10) years						
	Certification that the 95% uptime of the product is within the warranty period and that any accumulated downtime in						

	excess of 5% shall be added to the warranty period.						
	Submit Semi-Annual Preventive Maintenance Schedule and Annual Calibration Service Schedule during warranty period (include month and year)						
	Procedures to be performed upon delivery:						
	Training of End-User (Operation) and Biomedical Unit (Troubleshooting) with Certificate of Training should be provided and should contain the following details: a. Name of Trainee b. Modality, Brand, Model of Equipment c. Type of Training Conducted d. Inclusive Dates of the Training e. Name of Trainer, Date and Venue f. Recommended maintenance as per manufacturer						
	The unit to be delivered must show proof that its manufacturing date must be CY 2025 onwards						
	Perform Electrical Safety Test (IEC 62353)						
	Provide two (2) sets of colored Technical Manual, Hardcopy and Softcopy (Flashdrive) in English Manual for all equipment including peripherals, etc. a. User's Operational Manual b. Quality and Maintenance Manual c. Service and Technical Manual						
	Other Terms & Condition:						
	Preferably with green eco-products specification (made of recyclable and non-toxic materials, energy efficient, sustainability, etc.)						
	Delivery: Sixty (60) calendar days from the date of receipt of Purchase Order (PO)						
					TOTAL:	P 14,560,333.33	

OTHER ISSUES AND CONCERNS:

- All requests for cancellation will be reflected to the Performance Evaluation of the Supplier.
- ***PRICE SCHEDULE***
- Column 1 – Should be in accordance with VMC’s item number.
- Column 2 - Indicate the **item description of your offer** with BRAND. If no BRAND, indicates **GENERIC OR NO BRAND. Please include your packaging for each item to be bid.**
- Column 3 – Country of Origin/Source of Domestic Product, as certified by the Relevant Agency
- The Price Schedule should be filled completely or put zero (0) or dash (-) if not applicable.
- The final unit price should be stated.
- In the Price Schedule, “*For Goods Offered from Abroad Form*” will be used if the origin of the item is from abroad, if manufactured in the Philippines, “*For Goods Offered from Within the Philippines Form*” shall be used. (Please use the attached Form/Template)

- Bid Bulletin will be posted, if any.
- Bidders are advised to use two (2) decimal places in setting up their bid prices.
- For on-going contracts, please indicate the total amount of all outstanding contracts.
- Lowest Calculated Bidder (LCB) shall undergo evaluation of the item being offered.
- Failure of the supplier to deliver on time will be subjected to termination of contract as to the awarded item. Performance Bond shall be forfeited in favor of VMC.
- For CMDN/CMDR: Initial Application/Registration from FDA is not allowed
- The deadline of queries will be on September 18, 2026 (until 5:00pm)
- All items will be subject for Actual Product Demonstration during Post Qualification Evaluation, preferably within Metro Manila if on-site.
- BAC Official Email: vmc_bac2026@yahoo.com
- **FORMS** (<https://www.gppb.gov.ph/downloadable-forms/>)

BID Opening will be on September 29, 2026 at 9:00 AM

The pre-bidding conference was adjourned at 3:00 pm.

Prepared by:

KRISTINE JOY MANUEL
BAC Secretariat

Noted by:

RUBY S. GURREA, RN, MAN
Chairperson, BAC

"PHIC Accredited Healthcare Provider"
"Valenzuela Medical Center...Where your health matters most"



Address: **Padrigal St., Karuhatan, Valenzuela City, 1441**
Telephone Nos: **8294-6711 to 17**
Director's Office Direct Line: **8291-4259**
Email Address: **valgen_hosp@yahoo.com**
Website: **<https://vmc.doh.gov.ph/>**

FORMS

BENEFICIAL OWNERSHIP DECLARATION
(Sample Only)
FOR THE YEAR:

COMPANY DETAILS		
CORPORATE NAME:		
SEC REGISTRATION NUMBER:		
ENTITY TYPE:	FILING TYPE:	DATE OF FILING:

BENEFICIAL OWNER DETAILS		
COMPLETE NAME:		
DATE OF BIRTH:	SEX:	NATIONALITY
RESIDENTIAL ADDRESS:		
EMAIL ADDRESS:		
MOBILE NUMBER:		LANDLINE NUMBER:
TIN / PASSPORT NO.:		POLITICALLY EXPOSED PERSON:
TOTAL OWNERSHIP RIGHTS:		

CATEGORY OF BENEFICIAL OWNERSHIP: <i>(Encircle the letter applicable)</i>	
A	Natural person(s) owning, directly or indirectly or through a chain of ownership, at least twenty percent (20%) of the voting rights, voting shares or capital of the reporting corporation.
B	Natural person(s) who exercise control over the reporting entity through any contract, understanding, relationship, intermediary, or tiered entity.
C	Natural person(s) having the ability to elect a majority of the board of directors/trustees, or any similar body, of the reporting entity.
D	Natural person(s) having the ability to exert a dominant influence over the management or policies of the reporting entity.
E	Natural person(s) whose directions instructions or wishes in conducting the affairs of the reporting entity are carried out by a majority of the board members.
F	Natural person(s) acting as stewards of properties of the reporting entity, where such properties are under the care or administration of said natural person(s).
G	Natural person(s) who actually own or control the reporting entity through nominee shareholders or nominee directors acting for or on behalf of such natural persons.
H	Natural person(s) ultimately owning or controlling or exercising ultimate effective control through other means not falling under any of the foregoing categories including substantial benefits such as exclusive use of the reporting entity's assets, receipt of profits and liquidating dividends, among others.
I	Natural person(s) exercising control through senior management positions within the reporting entity. This category is applicable only when no natural person is

	identifiable under Categories A through H after exhausting reasonable means of identification. If there are multiple persons in the same level of seniority, all such persons shall be identified as beneficial owners.
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ATTESTATION CLAUSE

By proceeding with the submission, the declarant certifies that:

- 1. The information provided is true, correct, and complete to the best of my knowledge;
- 2. The information provided reflects the latest beneficial ownership information of the reporting company; and
- 3. I may be held liable for any criminal, administrative, or civil penalty that may be imposed for any false declaration in the submission.

☐ I hereby agree to the attestations.

Attested by: _____

Bid Form for Procurement of Goods/Infrastructure Projects

[Note: The duly accomplished form shall be submitted with the Bid]

BID FORM

Project Identification No.: *[Insert number]*

To: *[Name of Procuring Entity]*

Having examined the Philippine Bidding Documents (PBD) including the Supplemental Bid Bulletin Numbers *[insert numbers]*, the receipt of which is hereby duly acknowledged, we, the undersigned, declare that:

- a. I/We have no reservation to the PBD, including the Supplemental Bid Bulletins, for the Procurement Project *[Project Title]*;
- b. Select one, delete the other
 - I/We undertake to deliver the Goods in accordance with the delivery schedule in the Schedule of Requirements;
 - I/We offer to execute the Works for this Contract in accordance with the PBD;
- c. The total price of our Bid in words and figures, excluding any discount offered below, is *[insert information]*
- d. The discounts offered and the methodology for their application, if any, are: *[insert information]; or indicate N/A if no discount offered]*
- e. The total bid price in words and figures, after applying the applicable discount, 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 in the *[Select one, delete the other: the Price Schedules/ Detailed Estimates]*.
- f. This Bid shall remain valid within a period stated in the PBD, and it shall be binding upon me/us at any time before the expiration of that period;
- g. If our bid is accepted, I/we commit to enter to a contract and provide a performance security in the form, amounts, and within the times prescribed in the PBD, and hereby acknowledge the consequences under the IRR of RA No. 12009 on forfeiture of Bid Security or enforcement of Bid Securing Declaration and on Blacklisting.

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 the Bidder.

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

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

The undersigned is authorized to submit the bid on behalf of *[Name of the Bidder]* as evidenced by the attached *[State the Written Authority]*.

I/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.

Duly authorized to sign the Bid for and behalf of:

[Insert Bidder's Name]

[Signature over Printed Name]

[Position/Designation]

[Date]

Pricing Details for Goods Offered from Within the Philippines

Summary of Bid Prices

1	2	3	4
Item No.	Item	Particulars / Description	Total Amount

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

Price Schedule for Goods

Name of Bidder _____ Project ID No. _____ Page ____ of ____

Pricing Details for Goods Offered from Abroad

1	2	3	4	5	6	7	8	9
Item	Description	Country of origin	Quantity	Unit price CIF port of entry (specify port) or CIP named place (specify border point or place of destination)	Total CIF or CIP price per item (col. 4 x 5)	Unit Price Delivered Duty Unpaid (DDU)	Unit price Delivered Duty Paid (DDP)	Total Price delivered DDP (col 4 x 8)

Summary of Bid Prices

The Procuring Entity may modify the table below as necessary to comply with the requirements of the Project.

1	2	3	4
Item No.	Item	Particulars / Description	Total Amount

Name: _____

Signature: _____

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

Omnibus Sworn Statement Form
[Note: The duly accomplished form shall be submitted with the Bid]

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

OMNIBUS SWORN STATEMENT

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

1. *Select one, delete the others:*

- *If sole proprietorship:* I am the sole proprietor or authorized representative of *[Name of Bidder]* with office address at *[Address of Bidder]*;
- *If 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]*;
- *If individual consultant not registered under a sole proprietorship, in case of Consulting Services:* I am the individual consultant or authorized representative of *[Name of Bidder]* with office address at *[Address of Bidder]*;

2. *Select one, delete the others:*

- *If 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 *[Project Title]* of the *[Name of the Procuring Entity]* *[insert "as supported by the attached duly notarized Special Power of Attorney" for authorized representative]*;
- *If 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 *[Project Title]* of the *[Name of the Procuring Entity]*, as supported by the attached duly notarized Special Power of Attorney, Board/Partnership Resolution, or Secretary's Certificate, whichever is applicable;
- *If individual consultant not registered under a sole proprietorship, in case of Consulting Services:* As the individual consultant 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 *[Project Title]* of the *[Name of the Procuring Entity]*, as supported by the attached duly notarized Special Power of Attorney *for authorized representative*;

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;

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 others:*

- *If sole proprietorship* : The *[Name of Bidder]* and its spouse are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), or the End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
- *If partnership* : The partnership itself and the partners of *[Name of Bidder]* are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), or the End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
- *If cooperative*: The cooperative itself and members of the board of directors, general manager, or chief executive officer of *[Name of Bidder]* are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), or the End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
- *If corporation, or joint venture*: The corporation or joint venture itself, and officers, directors, controlling stockholders and beneficial owners of *[Name of Bidder]* are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;
- *If individual consultant not registered under a sole proprietorship, in case of Consulting Services*: The individual consultant and its spouse are not related by consanguinity or affinity up to the third civil degree to the Head of the Procuring Entity, Procurement Agent (if engaged), End-User or Implementing Unit, project consultants, head of the Project Management Office, or the members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat;

7. It is understood that failure to faithfully disclose its relationship with the Head of the Procuring Entity, members of the BAC, the TWG, and the BAC Secretariat, the head of the PMO or the end-user unit or implementing unit, and the project consultants of the Procuring Entity, or of the procurement agent by consanguinity or affinity up to the third civil degree, as well as its submission of beneficial ownership information containing false entries shall be subject to blacklisting under Section 100 of the Implementing Rules and Regulations (IRR) of Republic Act (RA) No. 12009, without prejudice to criminal and civil liabilities under applicable laws, including their accessory penalties, if any.

Select one, delete the rest:

- *In case of corporations: [Name of Bidder] declares its beneficial ownership information consistent with its updated General Information Sheet or Beneficial Ownership Declaration Form or any other document duly submitted to the SEC and has maintained a valid and updated file therein in compliance with Sections 20.2.9.1, 81, and 82 of the IRR of RA No. 12009.*
- *In case of Foreign Bidders: [Name of Bidder] submitted an appropriate equivalent document in English issued by the country of the bidder concerned in accordance with Section 20.2.9.2 of the IRR of RA No. 12009.*

8. *[Name of Bidder] complies with existing labor laws and standards; and*

9. *[Name of Bidder] is aware of and has undertaken the following responsibilities as a Bidder:*

- Carefully examine all of the Bidding Documents;*
 - Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;*
 - Made an estimate of the facilities available and needed for the contract to be bid, if any; and*
 - Inquire or secure Supplemental Bid Bulletin(s) issued for the [Project Title].*
10. *[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.*
11. *In case advance payment was made or given to [Name of Bidder], failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability under existing laws.*

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

Duly authorized to sign the Bid for and behalf of:

[Insert Bidder's Name]

[Affiant's Signature over Printed Name]

[Position/Designation]

[Date]

JURAT

SUBSCRIBED AND SWORN to before me this ____ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-

13-SC). Affiant/s exhibited to me his/her *[insert type of government identification card used]*, with his/her photograph and signature appearing thereon, with no. _____.

WITNESS MY HAND AND SEAL this ____ day of *[month]* *[year]*.

NAME OF NOTARY PUBLIC
Notarial Commission No. _____
Notary Public for _____ until _____
Roll of Attorneys No. _____
PTR No. __, *[date issued]*, *[place issued]*
IBP No. __, *[date issued]*, *[place issued]*

Doc. No. _____
Page No. _____
Book No. _____
Series of _____.

Bid Securing Declaration Form
*[The duly accomplished form shall be submitted with the Bid
if bidder opts to provide this type of bid security]*

REPUBLIC OF THE PHILIPPINES)
CITY/MUNICIPALITY OF _____) S.S.

BID SECURING DECLARATION
Project Identification No.: [Number]

To: *[Insert name 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;

[Insert paragraph for Unsolicited Offer with Bid Matching]

I/We understand that upon conferment of the original offeror status under Section 30.6 of the Implementing Rules and Regulations (IRR) of Republic Act (RA) No. 12009, the offeror shall submit a Bid Securing Declaration within ten (10) days from the receipt of the certificate of conferment;

2. Select one, delete the other:

- I/We accept that: (a) I/we will be automatically disqualified from bidding for any procurement contract with any Procuring Entity upon receipt of your Blacklisting Order; and, (b) I/we will pay the applicable fine provided under 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 52.2 (a), 63.2, 69.1 and 100, except 100.3 (c), of the IRR of Republic Act No. 12009; without prejudice to other legal action the government may undertake; and

(For Unsolicited Offer with Bid Matching)

- I/We accept that: I/we will be automatically disqualified from any procurement opportunity of the Procuring Entity for a period of one (1) year on the first offense, two (2) years on the second offense, and perpetually on the third offense 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:

Upon expiration of the bid validity period, or any extension thereof pursuant to your request;

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;

[Insert this paragraph for Unsolicited Offer with Bid Matching]

Upon contract award and the LCCRB is not the original offeror; or

I am/we are declared the bidder with the *[Insert Award Criterion]* 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]*.

Duly authorized to sign the Bid for and behalf of:

[Insert Bidder's Name]

[Signature over Printed Name]
[Position/Designation]
[Date]

JURAT

SUBSCRIBED AND SWORN to before me this ____ day of *[month]* *[year]* at *[place of execution]*, Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her *[insert type of government identification card used]*, with his/her photograph and signature appearing thereon, with no. ____.

WITNESS MY HAND AND SEAL this ____ day of *[month]* *[year]*.

NAME OF NOTARY PUBLIC
Notarial Commission No. _____
Notary Public for _____ until _____
Roll of Attorneys No. _____
PTR No. __, *[date issued]*, *[place issued]*
IBP No. __, *[date issued]*, *[place issued]*

Doc. No. _____
Page No. _____
Book No. _____
Series of _____

NFCC COMPUTATION FOR ELIGIBILITY CHECK

A. Summary of the Applicant Supplier’s/Distributor’s/Manufacturer’s assets and liabilities on the basis of the attached income tax return and audited financial statement, stamped “RECEIVED” by the Bureau of Internal Revenue or BIR authorized collecting agent, for the immediately preceding year and a certified copy of Schedule of Fixed Assets particularly the list of construction equipment.

		Year 20
1.	Total Assets	
2.	Current Assets	
3.	Total Liabilities	
4.	Current Liabilities	
5.	Net Worth(1-3)	
6.	Net Working Capital(2-4)	

B. The Net Financial Contracting Capacity (NFCC) based on the above data is computed as follows:

NFCC= [(Current assets minus current liabilities) (15)] minus the value of all outstanding or uncompleted portions of the projects under ongoing contracts, including awarded contracts yet to be started, coinciding with the contract to be bid.

The values of the domestic bidder's current assets and current liabilities shall be based on the latest Audited Financial Statements (AFS) submitted to the BIR.

The Bidder shall attach the AFS to the NFCC Computation for Eligibility Check Form.

NFCC=P__

Submitted by:
Name of Supplier/Distributor/Manufacturer
Signature of Authorized Representative

Date: _

STATEMENT OF SINGLE LARGEST COMPLETED CONTRACT SIMILAR TO THE CONTRACT TO BE BID

This is to certify that _____(company)_____ has the following completed contracts within Ten (10) years from the date of submission and receipt of bids.

Date of the Contract	Contracting Party	Name of Contract	Kind of Goods Sold	Amount of Contract	Date of Delivery/ End-user's Acceptance	Date of Official Receipt	Bidder is A) Manufacturer B) Supplier C) Distributor

Name and Signature of
Authorized Representative

Date

*Instructions:

a) Cut-off date as of:

(i) Up to the day before the deadline of submission of bids.

b) In the column under “Dates”, indicate the dates of Delivery/ End-user’s Acceptance and Official Receipt.

c) “Name of Contract”. Indicate here the Nature/ Scope of the Contract for the Procuring Entity to determine the relevance of the entry with the Procurement at hand. Example: “Supply and Delivery of _____ for Valenzuela Medical Center”

STATEMENT OF: (I) ONGOING CONTRACTS AND; (II) AWARDED BUT NOT YET STARTED CONTRACTS						
This is to certify that _____ has the following ongoing and awarded but not yet started contracts:						
Date of the Contract	Contracting Party	Name of Contract	Kind of Goods Sold	Amount of Contract	Value of Outstanding Contracts	Bidder is A) Manufacturer B) Supplier C) Distributor
_____ Name and Signature of Authorized Representative				_____ Date		

- *Instructions:
- a) State all ongoing contracts including those awarded but not yet started (government and private contracts which may be similar or not similar to the project called for bidding) as of:
 - i. The day before the deadline of submission of bids.
 - b) If there is no ongoing contract including awarded but not yet started as of the aforementioned period, state none or equivalent term.
 - c) The total amount of the ongoing and awarded but not yet started contracts should be consistent with those used in the Net Financial Contracting Capacity (NFCC) in case an NFCC is submitted as an eligibility document.
 - d) "Name of Contract". Indicate here the Nature/ Scope of the Contract for easier tracking of the entries/ representations. Example: "Supply and Delivery of _____ for Valenzuela Medical Center"