



Republic of the Philippines
DEPARTMENT OF HEALTH
PHILIPPINE CHILDREN'S MEDICAL CENTER

Quezon Avenue, Quezon City 1100
website: www.pcmc.gov.ph email: officeofthedirector@pcmc.gov.ph
Trunkline: 8588-9900 DirectLine: 8924-0836 Fax No: 8924-0840

**NOTICE OF AWARD
NOA-2022-049**

MTC OPTO –MEDIC, INC.

631 Ronquillo St., Quiapo Manila
179 Yakal St. , Makati City
Tel. No.: 8813-1351/53/55, 8812-2162
Mobile No. 09178448058

E-mail Addresses: mtc.jhara.cabrera@gmail.com
mtcoptomedicsales@gmail.com

Dear Sir / Madam:

This is to inform you that based on the result of the conducted Public Bidding for the project stated below under Invitation to Bid No. IB-2021-156 as per BAC Resolution No.R2022-01-064 , your proposal was found to be responsive.

QTY	UNIT	ITEM DESCRIPTION	TOTAL COST (Php)
1	unit	CRYO MACHINE Brand: KEELER/CRYOMATIC MK II (see Annex "A" for detailed specifications)	Php1,048,000.00

You are hereby required to provide on or before 30 JAN 2022 the Performance Security in either of the following form:

FORM OF PERFORMANCE SECURITY	AMOUNT OF PERFORMANCE SECURITY (Equal to Percentage of the Total Contract Price)
a) Cash or cashier's/ manager's check issued by a Universal or Commercial Bank	Five percent (5%) Php52,400.00
b.) Bank draft/guarantee or irrevocable letter of credit issued by a Universal or Commercial Bank: Provided, however, that it shall be confirmed or authenticated by a Universal or Commercial Bank, if issued by a foreign bank	
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.	Thirty percent (30%) Php314,400.00

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Failure to provide the Performance Security shall constitute sufficient ground for cancellation of the award and imposition of penalties/ forfeiture corresponding to the Bid Security posted.

We will furnish you the approved Purchase Order (PO) upon receipt of funds from the Department of Budget and Management (DBM)

Very truly yours,

As/Keyly
SONIA B. GONZALEZ, MD MScHSM, MPM
OIC, Executive Director *msf*

Conforme:

This is to certify that the company has authorized me to accept this award, sign all related documents and hold the company bound by rules and laws applicable thereto.

Authorized Signatory (Signature over printed name)

Designation

Date

ml

QTY	UNIT	ITEM DESCRIPTION	TOTAL COST
1	unit	CRYO MACHINE	Php1,048,000.00
		BRAND: KEELER	
		MAKE / MODEL: KEELER/ CRYOMATIC MK II	
		A. Specifications	
		1. Will provide Local Trolley Stainless	
		2. Gas Specification: Medical grade Nitrous Oxide(N ₂ O) or Medical Grade Carbon dioxide (CO ₂) in Non- syphonic cylinders	
		3. Operating range: 3100-4480 kPA (450-650PSI/31-45 Bar)	
		4. Maximum Cylinder Pressure:8275 kPa(1200PSI/83 Bar)	
		5. Input Voltage Range: 100-240Vac (50/60Hz)	
		6. Dimension: Width: 350 mm (14") Depth: 200mm (8") Height: 190mm (7.5")	
		7. Weight: 4.5 kg (10lbs)	
		8. Equipment Classification: Class 1, Type BF (Applied Part)	
		9. Protection Against Ingress Console IpxO Footswitch IPX7	
		10. Graphical LCD used to provide system information to the user; such as probe information, gas cylinder status and freeze time.	
		11. Storage: +10°C to +55°C Operating:+10°C to +40°C	
		12. Temperature Range: -40°C to +70°C	
		13. Relative Humidity: Transport: 10% to 95% Storage: 10%to 95% Operation: 30% to 90%	
		14. Atmospheric Pressure: Transport: 500hPa to 1060hPa Storage: 700hPa to 1060hPa Operation: 800hPa to 1060hPa	
		15. The unit operates at 100-240VAC (50/60Hz)	
		16. Power consumption: 100 VA	
		17. Mechanical Parts are made of heavy duty durable type	
		18. Equipment is maintainable and serviceable	
		B. ACCESSORIES to be provided per unit	
		1. One (1) Unit AVR compatible to the unit	
		Brand : STAVOL	
		Model: 1000VA	
		2. Retina Probe #2: 2509-P-8030-Compact Retinal Probe	
		3. Footswitch	
		C.WARRANTY	
		1. With two (2) years warranty on services, parts and accessories	
		2. With free quarterly preventive maintenance and calibration	
		E. With duly notarized certificate from Distributor - MTC - Optomedic Inc.	
		Certifes that:	

QTY	UNIT	ITEM DESCRIPTION	TOTAL COST
1	unit	<p>CRYO MACHINE</p> <p>i. Parts, accessories and consumables are readily available at the authorized Philippine service center/s for a period of five (5) years after the warranty period. Service Center: 3rd Floor OHI Bldg. 179 Yakal St., San Antoio Village, Makati City. Tel Nos: 8813-1351/8813-1355/ Fax No. 8812-2162. Email Address : technical@mtceyecare.com/mtcservice.karen@gmail.com. Contact Person: Karen Parungao / Emilyn Frias</p>	<p>Php1,048,000.00</p>
		ii. Ensures availability of competence in-house technical specialist in handling and providing technical support as well as maintenance of the equipment being offered; and	
		iii. Assures conduct training for proper operation and maintenance to end-users of the equipment upon delivery;	
		iv. shall provide replacement/back-up unit while the delivered unit is being repaired.	
		F. With duly notarized certificate from Principal Manufacturer - KEELER OPTHALMIC INSTRUMENTS	
		Certifies that:	
		i. All the terms and conditions stated in bidding documents per IRR of RA 9184 and corresponding contract for the project will be honored including in the event that a change of distributorship will occurs during the duration of the contract up to the warranty and preventive maintenance period.	
		ii. The expected useful life of the equipment is five (5) to eight (8) years under normal use:	
		iii. Guarantees availability of all spare parts, accessories and consumables at least for the next five (5) years from testing, commissioning, acceptance and delivery;	
		iv. Guarantees provision of the certificate from the manufacturer for the consumer guidelines regarding disposal of the equipment(information about how and where the used and decommissioned products / parts can be returned for recycling and or disposal)	
		DELIVERY PERIOD: Forty Five - Sixty (45 - 60) Calendar Days	

Conforme:

Authorized Signatory (Signature over printed name)

Designation/Position

Date _____



MTC OPTO - MEDIC, INC.

3rd Floor, OHI Bldg., 179 Yakal Street, San Antonio Village, Makati City, Philippines

☎(63-2) 8812-2162 📠(63-2) 8813-1351 / 0917-8448058

E-Mail: sales@mtceyecare.com

CERTIFICATION

This is to certify that **MTC Opto-Medic, Inc.** guarantees the provision of the certificate from the manufacturer for the consumer guidelines regarding disposal of the equipment (Information about how and where the used and decommissioned products/parts can be returned for recycling and/or disposal).

This certificate was issued in compliance with the requirements for **Supply and Delivery of Various Medical Equipments – Supply and Delivery of Cryo Machine (Re-bid) IB-2021-156.**

A handwritten signature in black ink, appearing to read 'Cesar E. Roxas', is written over a horizontal line.

CESAR E. ROXAS

Name of Company of Authorized Representative

January 6, 2022

Date

MTC Opto-Medic, Inc.

Name of Company