



Republic of the Philippines
PHILIPPINE CHILDREN'S MEDICAL CENTER
 Quezon Ave. Quezon City
 Tel. No.: 8588-9900 loc. 224, 226, 361, 355
 Fax no.: 85889997 • e-mail: pcmcproc@gmail.com

PURCHASE ORDER **Nº 74951**
 FOR SUPPLIES OR EQUIPMENT
 P. R. NO. NS Patient Care 2022-007 Dated: August 1, 2022
 MODE OF PROCUREMENT
COMPETITIVE BIDDING
 CS No. _____ AC No. _____
 DATE OF P.O. May 3, 2023

TO: Supplier/Dealer Contractor Zafire Distributors, Inc.
 Address: _____
 49 Examiner St. West Triangle Quezon City Tel. No: (02) 925-0500, 925-0501

Department/Office/Division/Section/Unit where delivery Is to be made: _____
 Location: Materials Management Division
 Special Instructions Ground Floor, PCMC Bldg.
 Delivery period: 7 working days
 Performance Security Posted: Surety Bond No. CAL/LIC-23-204
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P 29,134.28
 Other Terms: BANK GUARANTEE

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
1	4	unit	<p>Supply and Delivery of Phototherapy, Blue Light Brand: Comen, Model: BL70</p> <p>A. SPECIFICATIONS 1. Incorporate a state-of-the-art light source for the treatment of new-born jaundice 2. Deliver Intensive phototherapy: 25-45w/cm2/nm 3. Utilize blue light emitting diodes (LEDs) with wavelength 400-550 nm 4. Light enclosure is compact in size and light weight: 35cm x 45cm x 60cm 5. Movable and adjustable pole: 40mm x 780mm at maximum height 6. Adjusted both horizontally and vertically and tilted over a wide angle range (up to 90 degrees) 7. Base roll stand four wheels with lock 8. The unit will be operated at 230 volts, 3 Pin power plug/cable, strictly at 60 hertz 9. No separate volt conversion 10. Power Consumption: 25W 11. Mechanical parts are of heavy duty durable type 12. Equipment is maintainable and serviceable</p> <p>B. Accessories (per unit) 1. One (1) unit UPS with frequency converter per unit Brand: PHOENIX Model: TTN-V G2 2. Will provide one (1) unit Phototherapy light meter for the total number of units</p> <p>C. Consumables to be Provided (Per Unit) 1. Will provide five (5) disposable eye cover/protector per unit (3 small, 2 medium) 2. Complete set of Led Light bulbs of 50,000 hrs. life span</p> <p>D. Warranty 1. With one (1) year warranty on parts and services 2. With quarterly preventive maintenance and calibration with certificate and sticker 3. Conduct proper training for operations for end-user</p> <p style="text-align: right;">vvvvvvvvvvvvv</p> <p style="text-align: center;">(Five Hundred Eighty Two Thousand Six Hundred Eighty Five Pesos and 60/100)</p>	145,671.40	582,685.60

Funding Code _____ **TOTAL AMOUNT P 582,685.60**

FUNDS AVAILABLE: <u>LEA M. VILLALOBOS, CPA</u> Chief Accountant APPROVED: <u>SONIA B. GONZALEZ, MD, MSsHSM, MPM</u> Executive Director	Attachments: <input type="checkbox"/> P.R. No. <u>NS Patient Care 2022-007</u> <input type="checkbox"/> Abstract of Canvass/Bids <input type="checkbox"/> Canvass Sheet/Tender of Bids <input type="checkbox"/> Notarized Certification of Exclusive Distributor <input type="checkbox"/> Justification <input checked="" type="checkbox"/> Others x <u>BAC RESO NO. R2023-04-220</u> x <u>NOA-2023-100</u> x <u>NTP-PROC-2023-226</u>	CERTIFICATION This is to certify that I received today the copy of this Purchase Order, and held the Company bound by the terms and stipulation of the contract and other laws applicable. _____ (Signature over printed name) Date: _____
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Distribution: White (Original) - Attachment to payment
 Yellow (Duplicate) - Procurement
 Pink - Supply and Property



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PURCHASE ORDER 74951
FOR SUPPLIES OR EQUIPMENT
 P. R. NO. _____ Dated: **August 1, 2022**
 MODE OF PROCUREMENT: **NS Patient Care 2022-007**
COMPETITIVE BIDDING
 CS No. _____ AC No. _____
 DATE OF P.O. **May 3, 2023**

TO: Supplier/Dealer Contractor **Zafire Distributors, Inc.**
 Address: **49 Examiner St. West Triangle Quezon City Tel. No: (02) 925-0500, 925-0501**

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 Performance Security Posted: Surety Bond No. **CA/CLC-23-204**
 Cash / Cashier's / Manager's Check No. _____
 PCMC O.R. No. _____ Amount P **29,134.28**

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
			<p>E. With duly notarized certificate from Distributor- ZAFIRE Distributors, Inc. ✓ Certifies that:</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 ✓</p> <p>ii. It has available competent in-house technical specialists in handling and providing technical support as well as maintenance of the equipment being offered; ✓</p> <p>iii. That it will conduct training for proper operation and maintenance to end-users of the equipment upon delivery; and ✓</p> <p>iv. It will provide replacement/back-up unit while the delivered unit is being repaired. ✓</p> <p>F. With duly notarized certificate from Principal Manufacturer- SHENZHEN COMEN MEDICAL INSTRUMENTS ✓</p> <p>i. All the terms and conditions stated in the bidding documents per IRR of RA 9184 and corresponding contract for the project shall be honored by the principal manufacturer including the event that a change of dealership will occur during the duration of the contract up to warranty and preventive maintenance period. ✓</p> <p>ii. The product can be used safely at least five (5) years from production date which will be printed on box ✓</p> <p>iii. Guarantee on availability of all spare parts, accessories, and consumables at least for the next five (5) years from testing, commissioning, acceptance, and delivery; ✓</p> <p>iv. That it has competence in handling and providing technical support as well as maintenance of the equipment being offered; and ✓</p>		

Funding Code _____ **TOTAL AMOUNT P 582,685.60**

FUNDS AVAILABLE:
LEA M. VILLALOBOS, CPA
 Chief Accountant

APPROVED:
SONIA B. GONZALEZ, MD, MSsHSM, MPM
 Executive Director

- Attachments:
- P.R. No. **NS Patient Care 2022-007**
 - Abstract of Canvass/Bids
 - Canvass Sheet/Tender of Bids
 - Notarized Certification of Exclusive Distributor
 - Justification
 - Other **BAC RESO NO. R2023-04-220**
 - NOA-2023-100**
 - NTP-PROC-2023-226**

CERTIFICATION
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PURCHASE ORDER 74951
FOR SUPPLIES OR EQUIPMENT
 NS Patient Care 2022-007 / August 1, 2022
 P. R. No. _____ Dated: _____
 MODE OF PROCUREMENT: **COMPETITIVE BIDDING**
 CS No. _____ AC No. _____
 DATE OF P.O. May 3, 2023

TO: Supplier/Dealer Contractor **Zafire Distributors, Inc.** ✓
 Address: _____
 49 Examiner St. West Triangle Quezon City Tel. No: (02) 925-0500, 925-0501

Department/Office/Division/Section/Unit where delivery _____
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 Other Terms: BANK GUARANTEE

Item No.	QTY.	UNIT	ARTICLES	UNIT COST	TOTAL COST
			<p>v.Consumer guidelines regarding disposal of the equipment</p> <p>1.If the expired device and its components are discarded at will, it will cause damage to the local environment Please dispose them according to the relevant local laws and regulations or the hospital's rules and regulations or return to the company for disposal. ✓</p> <p>F. Delivery Schedule: Within Forty Five (45) to Sixty (60) calendar days from receipt of Purchase Order/Notice to Proceed ✓</p> <p style="text-align: center;">For the use of: Nursing Service Patient Care</p>		

Penalty Clause for Delayed or Unsatisfactory Deliveries:

- One-tenth (1/10) of one percent (1%) of the cost of unperformed portion for everyday of delay. Once the cumulative amount of liquidated damages reaches 10% of the amount of the contract, the Procuring Entity may rescind or terminate the contract, without prejudice to other courses of action and remedies available under the circumstances.
- Excess in price, if procured from third parties, through alternative mode of procurement; and
- In case of bidding, forfeiture of performance security equal to 5% of the undelivered item/s.

vvvvvvvvvvvv

Funding Code 1-26-05-110 - (2021 Eo) mag 5/5/23
 629M
TOTAL AMOUNT P 582,685.60

FUNDS AVAILABLE 582,685.60
 LEA M. VILLALOBOS, CPA

Chief Accountant

APPROVED:
Sonia B. Gonzalez
SONIA B. GONZALEZ, MD, MSsHSM, MPM
 Executive Director

- Attachments: NS Patient Care 2022-007 ✓
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 - Others BAC RESO NO. R2023-04-220 ✓
 - x NOA-2023-100 ✓
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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

Trunk Line: 8588-9900 to 20 Direct Line: 8924-6601

NOTICE TO PROCEED
NTP-PROC-2023-226

Date: May 3, 2023

ZAFIRE Distributors Inc.
49 Examiner St. West Triangle
Quezon City
Tel. No: (02) 925-0500, 925-0501

Sir/Madam:

This is to inform you that Purchase Order No. 74951 as a result of Public Bidding for the purchase of **Supply and Delivery of Four (4) units of Phototherapy, Blue Light** (Brand: Comen Model: BL70) has been approved.

You may now proceed with the delivery of the items listed in the attached Purchase Order within Forty Five (45) to Sixty (60) calendar days from receipt of this notice.


SONIA B. GONZALEZ, MD MScHSM, MPM
Executive Director 

CONFORME:
Received Original

Signature Over Printed Name
Authorized Representative
Date: _____