

PHILIPPINE CHILDREN'S MEDICAL CENTER Quezon Avenue, Quezon City

ALTERNATIVE MODE

REQUEST FOR QUOTATION No. RFQ-2024-042

| Nan | e: ne of Supp | alior: | | | | | | |
|-----|---------------------------------|----------------|--|---------------|-----------------------------|--|----------------|------------|
| | ress: | mer. | | | | | | |
| | phone No | ο. | | | | | | |
| (Sm | all Value | 2 - 53.9 | lowest price as per specifications per item lise 9) on or before | | | | | |
| M | дту ОТУ | UNIT | DESCRIPTION | ABC/UNIT | TOTAL ABC | BRAND/ PACKAGING | UNIT COST | TOTAL COST |
| 1 | 19,200 | cont | Water, purified round container, 5 gal/cont. | 35.00 | 672,000.00 | | | |
| | | | Allocation: | | | | | |
| | | | Patients - 2,928 | | | | | |
| | | | Employees - 16,272 | | | n announce processes and an anti-conference of the enterior and the enterior and the enterior and the enterior | | |
| | MC Re | | | Please indica | 672,000.00 ute below your o | lelivery period | in number of c | lays. |
| De | livery P | eriod | l: | | | | | |
| | Docume Nego. Pro PhilGEPS | ntary Foc (53. | ditions: very and Staggered Payment for CY-2024 Requirements: 9) - Small Value ess Permit | | | | (Mya | RT-2024 |
| | PhilGEPS | Reg. N | | | | | | |

*For Certificate of Creditable Tax Withheld at Source (BIR Form No. 2307) and Certificate of Final Tax Withheld at Source (BIR Form No. 2306) please submit your latest/updated <u>BIR Certificate of Registration (BIR Form No. 2303)</u> together with your quote.

PDAL-PCMC-RQF3 050422 Rev 2

PHILIPPINE CHILDREN'S MEDICAL CENTER Quezon Avenue, Quezon City

WATER STATION (WITH DISPENSER)

TERMS OF REFERENCE

- 1. PROVISION OF DISPENSER -46 UNITS (attached list)
- 2. DISPENSER WITH STAND, FOR COLD WATER ONLY
- 3. DISPENSER IS ON LOAN ONLY, SUPPLIER TO REPLACE WITHIN 24 HOURS ANY DEFECTIVE DISPENSER UNITS
- 2. SUBMISSION OF RESULT OF WATER TEST ANALYSIS BY A 3RD PARTY LABORATORY EVERY MONTH
- 3. STAGGERED DELIVERY, PAYMENT
- 4. DELIVERY: WEEKLY PER DOS
- 5. SCHEDULE OF DELIVERY: WEEKLY, EVERY MONDAY 8:00am to 12:00nn. OR AS NEEDED PER DOS
- 6. EMPTY CONTAINERS WILL BE RETURNED DURING DELIVERY (SWAPPING EMPTY FOR FULL)
- 7. DELIVERY WILL BE AT THE MATERIALS MANAGEMENT DIVISION

| CONFORME: | | | | |
|--------------|---------|---------|--------|--|
| SIGNATURE OV | FR PRIN | TFD NAM | F/DATE | |

PHILIPPINE CHILDREN'S MEDICAL CENTER Quezon Avenue, Quezon City

WATER STATION (WITH DISPENSER)

| UNIT | STATION | UNITS TO SHARE |
|--|---------|-----------------|
| | 1 | ONTO TO OTHER |
| OFFICE OF THE EXECUTIVE DIRECTOR | | |
| OFFICE OF THE DEPUTY DIRECTOR- | | |
| PROFESSIONAL SERVICES | - | |
| OFFICE OF THE DEPUTY DIRECTOR- HOSPITAL | 1 | |
| SUPPORT SERVICES | - | |
| OFFICE OF THE DEPUTY DIRECTOR - NURSING | | |
| SERVICES | | |
| | | |
| PROFESSIONAL SERVICES | 1 1 | |
| CHILD NEUROSCIENCE DIVISION | 1 | PABX |
| NEURODIAGNOSTIC UNIT | 1 | T ADA |
| CANCER AND HEMATOLOGY DIVISION | 1 | |
| NEONATOLOGY DIVISION | 1 | |
| MILK BANK | 1 | |
| ADOLESCENT MEDICINE DIVISION | 1 | |
| PCC-EMERGENCY ROOM | 1 | |
| COVID TRIAGE | 1 | PCC OFFICE |
| PCC-PED.INTENSIVE CARE UNIT | + + | MISSD- GASTRO |
| MISSD-PULMONOLOGY | + + | WIIGOD ONGTHE |
| MISSD-PED. CARDIOLOGY | 1 | |
| MISSD-HEMODIALYSIS GENERAL PEDIATRIC SERVICES DIVISION | 1 | TB DOTS |
| GENERAL EDIATIO CENTROLO DE CONTROLO DE CO | | |
| SURGICAL DEPARTMENT | | |
| PEDIATRIC SURGERY DIVISION | 1 | |
| PEDIATRIC ANESTHESIA DIVISION | | |
| PERINATOLOGY DIVISION | 1 | |
| PEDIATRIC DENTISTRY DIVISION | | |
| ALLIED MEDICAL DEPARTMENT | | |
| PATHOLOGY DIVISION | | 1 |
| BLOOD BANK | | 1 |
| MOLECULAR LABORATORY | | 1 |
| RADIOLOGY DIVISION | | 1 |
| REHABILITATION MEDICINE DIVISION | | 1 |
| NURSING SERVICES | | |
| NURSING OFFICE | | |
| NURSING TRAINING OFFICE | | 1 |
| GENERAL NURSING - WARDS | | 7 |
| GENERAL NORGING - WARRES | | |
| ETRS | | |
| MEDICAL RECORDS | | 1 SR |
| TVIED TO THE T | | NURSING |
| LIBRARY DIVISION | | |
| LIBRARY DIVISION CLINICAL TRIAL AND RESEARCH DIVISION | | ' ITRAINING/PDD |
| LIBRARY DIVISION | | TRAINING/PDD |

| | I | |
|--|---------|------------------|
| | CTATION | LINITO TO CLIADE |
| UNIT | STATION | UNITS TO SHARE |
| INFECTION PREVENTION AND CONTROL | 1 | |
| PULMO TEMPORARY OFFICE (3RD FLOOR) | | |
| DIRECTOR'S OFFICE | - | |
| MANAGEMENT SERVICES DEPARTMENT | | |
| OFFICE OF THE MANAGER, MANAGEMENT | | |
| SERVICES DEPT. | | |
| | | OFFICE OF THE |
| CORPORATE PLANNING DIVISION | 1 | MANAGER, |
| | | |
| MANAGEMENT INFORMATION SERVICES DIVISION | 1 | |
| | | |
| HOSPITAL SUPPORT SERVICES | | |
| FINANCE DEPARTMENT | | |
| OFFICE OF THE MANAGER, FINANCE DEPT. | T | |
| ACCOUNTING DIVISION | 1 1 | INTERNAL AUDIT |
| BUDGET DIVISION | 1 | SERVICES |
| BILLING AND CLAIMS DIVISION | - | |
| TREASURY DIVISION | 1 | |
| TREASURT DIVISION | | |
| ADMINISTRATIVE DEPARTMENT | | |
| ADMINISTRATIVE DEPARTMENT | T | |
| OFFICE OF THE MANAGER, ADMINISTRATIVE | 1 | |
| DEPARTMENT | - ' | |
| PROCUREMENT DIVISION | | |
| MATERIALS MANAGEMENT DIVISION | 1 | MEDIA |
| HUMAN RESOURCE MANAGEMENT DIVISION | 1 | |
| | | HOUSEKEEPING/ |
| GSD/ENGINEERING | 1 | SECURITY |
| | | |
| ANCILLARY DEPARTMENT | | |
| NUTRITION AND DIETETICS DIVISION | 1 | LINEN |
| | | |
| DIVISION | | |
| ADMITTING | + 4 | |
| PHARMACY DIVISION | 1 | |
| | | |
| OTHERS | 1 | |
| COA | 1 | |
| | | |

TOTAL STATIONS (WITH DISPENSER)