

**PHILIPPINE CHILDREN'S MEDICAL CENTER**

Quezon Avenue, Quezon City

ALTERNATIVE MODE**REQUEST FOR QUOTATION****No. RFQ-2025-186**

Date: _____

Name of Supplier: _____

Address: _____

Telephone No. _____

Please quote your lowest price as per specifications per item listed below thru Small Value Procurement
on or before **April 25, 2025**

Please fax your quotation at 588-9997 or email at procurement@pcmc.gov.ph / Attention: Al Menor

ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	Supplier's Offer		
						BRAND/ Specifications	UNIT COST	TOTAL COST
	1	lot	Supply of design, labor, tools, parts, materials, installation, Testing and Commissioning of Medical Gas Piping System at Ward 2A Room 201 Consumables and Materials: 1. Four (4) pieces Copper Tube, 1/2" x 10ft. Type L, cleaned and degreased, ASTM Standard B 88 2. Four (4) pieces Copper Tube, 5/8" x 10ft. Type L, cleaned and degreased, ASTM Standard B 89 3. Twelve (12) pieces Copper Tube, 3/4" x 10ft. Type L, cleaned and degreased, ASTM Standard B 90 4. Twelve (12) pieces Copper Tube, 7/8" x 10ft. Type L, cleaned and degreased, ASTM Standard B 91 5. Nine (9) pieces Isolation Valve, 1/2" NPT 6. Two (2) pieces Isolation Valve, 1" NPT 7. One (1) lot Copper Fittings (Tee, Elbow, Coupling - 1/2", 5/8", 3/4", 7/8"), cleaned and degreased 8. One (1) lot Aluminum Angle Bar, Continuous Thread, Grip Anchor - for hangers and support 9. One (1) lot Acetylene, Oxygen, Nitrogen, Silver Rods	259,000.00	259,000.00			
			Scope of works:					
			1. Dismantling of One (1) unit Pendant					
			2. Materials handling					
			3. Leak testing using INFICON ultrasonic leak detector					
			4. Pressure test					



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ITEM NO.	QTY	UNIT	DESCRIPTION	ABC/UNIT	TOTAL ABC	Supplier's Offer		
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			5. Mobilization and demobilization					
TOTAL AMOUNT					259,000.00			
PCMC Requirement:						<i>Please indicate below your delivery period in number of days.</i>		
Delivery Period:								

Terms and Conditions:

Documentary Requirements:

Nego. Proc (53.9) - Small Value

PhilGEPS Ref#: _____

PhilGEPS Reg. No

Mayor's/ Business Permit

ITR [for ABC above 500k] required

Omnibus Sworn Statement [for ABC above 50k] required

CMR 4-22-2025

Signature over Printed Name _____

Name of Supplier _____

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

PDAL-PCMC-RQF3

050422 Rev 2