



Republic of the Philippines
Department of Health
OFFICE OF THE SECRETARY

NOTICE OF AWARD

MS. SHARMAINE SUZZETTE G. IMPERIAL

OCT 30 2020

Authorized Representative

One Top Medical Systems Resources

No. 7 Calderon St., Brgy. Marilag,

Project 4, Quezon City

Tel. No.: (02) 7-799-6805

Fax No.: (02) 7-501-2247

E-mail Address: sales.div1@onetop.ph

Dear Ms. Imperial,

This is to inform you that based on the result of the Competitive Bidding for the Procurement of Heavy Duty Cot Beds under IB No. 2020-231, this project is hereby awarded to your company as the bidder having been declared with the Lowest Calculated and Responsive Bid at a Total Contract Price of **One Million Seven Hundred Ten Thousand Philippine Pesos (PhP1,710,000.00)** inclusive of local taxes, for the item listed below:

| Item No. | Item Description | Qty. | Unit | Unit Cost (PhP) | Total Amount (PhP) |
|----------|---------------------|-------|-------|-----------------|--------------------|
| 1 | Heavy Duty Cot Beds | 1,000 | Piece | 1,710.00 | 1,710,000.00 |

You are hereby requested to indicate your concurrence of the award by signing this Notice of Award on the space below and return the same to the Procurement Service on or before **NOV 05 2020**.

You are also required to post the Performance Security in an amount not less than the required percentage of the total contract price in accordance with the following schedule:

| 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%) |
| 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%) |

You are required, **within ten (10) calendar days** from receipt of this Notice to submit a Performance Security and enter into contract with the Department of Health by signing the Contract Agreement Form which will be provided to you once you submit your performance security. Failure to do so shall constitute a sufficient ground for the cancellation of this award and forfeiture of the bid security.

By Authority of the Secretary of Health:

NESTOR F. SANTIAGO, JR., MD, MPH, MHA, CESO II
Assistant Secretary of Health
Public Health Services Team

Conforme:

CHARMAINE SUZZETTE G. IMPERIAL

Printed Name and Signature of Authorized Representative

Name of Bidder: **ONE TOP MEDICAL SYSTEMS RESOURCES**

Date: **11/03/2020**

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