



Republic of the Philippines  
Department of Health

## CENTRAL OFFICE BIDS AND AWARDS COMMITTEE

Name of the Procuring Entity: Department of Health

Name of the Project: **PROCUREMENT OF VARIOUS GOODS FOR DOH DORMITORY**

SVP No. **2020-070**

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Name of Company

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Address

Please submit your lowest price quotation on the item listed below, stating the shortest time of delivery duly signed by your representative not later than **10 December 2020; 9:00 A.M.**, Ground Floor, Building No. 6, Department of Health, San Lazaro Compound, Rizal Avenue, Sta. Cruz, Manila:

Item No.	Particular	Quantity	Unit	Total ABC (PhP)
1	Single Bed	40	piece	260,000.00
2	Blanket	60	piece	42,000.00
3	Bedding Set	60	piece	42,000.00
4	Pillow	60	piece	39,000.00
5	Coffee Table	20	set	50,000.00
<b>Total (PhP)</b>				<b>433,000.00</b>

**Your quotation is subject to the following General Conditions:**

- Price validity shall be for a period of Ninety (90) calendar days from the Opening of Bids.**
- Delivery Period: should be Thirty (30) calendar days upon receipt of approved Notice to Proceed (NTP) and approved sample.**
- DELIVERY SITE: Department of Health – Central Office, Supply Depot, San Lazaro Compound, Sta. Cruz, Manila**
- Terms of Payment/billing shall be made upon complete delivery and acceptance upon presentation of signed Invoice Receipts and submission of relevant documents as stipulated in the contract.
- Bidders are entitled to one (1) bid only, otherwise, all bids made shall automatically be rejected.**
- The prospective bidder shall submit three (3) sets of true copies of the original certified as such by the bidder or his authorized signatory of the**

**following requirements arranged, numbered and tabbed in a sealed envelope:**

- a. Duly accomplished and signed Price Quotation inclusive of all taxes;
- b. Duly accomplished and signed Technical Specifications using the attached form;

**NOTE: The supplier shall indicate the page(s) where the specific technical data in each technical specification can be found and attach these documents referred to with this form.**

**NOTE:** In case of award, kindly send a soft copy of technical specification being offered (Word & PDF format) to this email address: **cobac.csecretariat@gmail.com**

- c. Duly signed Schedule of Requirements using the attached form;
- d. Mayor's/ Business Permit issued by the city or municipality where the principal place of business of the prospective bidder is located or the equivalent document for Executive Economic zones or areas (2016 Revised IRR of RA9184) **together with corresponding copy of the receipt of payment of the said permit;**

*In consideration of the limited access to financial institutions, regulatory and other offices, as well as the implementation of government restrictions on transport and travel, Acceptability of the recently expired Mayor's or Business permits and the Official Receipt as proof that the Bidder has applied and paid for the renewal of the permit ; Provided that, the current and valid Mayor's or Business Permit as renewed, will be submitted by the bidder with the LCRB after the award of contract but before payment (GPPB Circular 09-2020)*

- e. PhilGEPS Registration Number;
- f. Latest Annual Income Tax / Business Tax Return also refers to Value Added Tax or Percentage Tax Return covering the previous six (6) months (if applicable);
- g. Omnibus Sworn Statement using the attached form;
- h. Duly notarized authority of the signatory using the attached form, whichever is applicable:
  - 1. Secretary's Certificate (i.e. corporation; joint venture agreement); or
  - 2. Special Power of Attorney (i.e. sole proprietor, partnership); or
  - 3. In case the signatory is the sole proprietor, copy of the DTI Registration Certificate

Acceptability of *Unnotarized Omnibus Sworn Statement and Authority of the Signatory* subject to compliance therewith after award of contract but before payment, for procurement activities during a State of Calamity, or implementation of community quarantine or similar restrictions declared or being implemented either in the locality of the PE or of the Bidder. (GPPB Resolution 09-2020)

**NOTE:** Bidders may submit their bid proposal on or before **10 December 2020, 9:00 AM.** to the COBAC-C Secretariat through any of the following options:

1. In printed copy to be submitted at the *G/F, Bldg. 6, Department of Health, San Lazaro Compound*; or
2. In soft copy via e-mail to **cobac.csecretariat@gmail.com** provided that it complies with the following condition:
  - i. It should be in a clear .PDF/.IMG/.JPG/.TIFF/.GIF/.PNG format, and shall be in password protected Request for Quotation in compressed archive folders pursuant to GPPB Resolution No. 09-2020 and Section 25.1 of the 2016 IRR of RA 9184;
  - ii. A generated bid receipt page or email acknowledgement indicating the time of submission must be secured and printed as a reference;
  - iii. The documentary requirements are arranged accordingly based on the Eligibility Checklist using the standard file name indicated therein.
  - iv. *For electronic bid submission, the password for accessing the Request for Quotation will be disclosed by the Bidders only during the actual bid opening which may be done in person or face-to-face through videoconferencing, webcasting or similar technology. (GPPB Resolution No. 09-2020 and Section 29 of the 2016 IRR of RA 9184)*

The BAC shall open the bid envelopes using a non-discretionary “pass/fail” criterion. *In case of electronic bid submission, Request for Quotation not in compressed archive folders and are not password protected, shall be rejected. However, bid envelopes that are not properly sealed and marked or not properly compressed and password-protected, as required in the Request for Quotation, shall be accepted, provided that the bidder or its duly authorized representative shall acknowledge such condition of the bid as submitted. The BAC shall assume no responsibility for the misplacement of the contents of the improperly sealed or marked bid, or improperly compressed or password-protected folder, or for its premature opening. (GPPB Resolution No. 09-2020 and Section 25.9 of the 2016 IRR of RA 9184)*

Further, once the GCQ is lifted or the Bidder is determined as the Single/Lowest Calculated and Responsive Quotation, whichever comes first, the Bidder shall submit three (3) sets of printed copies of the eligibility documents, certified as such by the bidder or his duly authorized representative.

Please use the attached Price Quotation, Technical Specifications, Schedule of Requirements, Sworn Statement and Authority of the Signatory Forms.

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**ROMEO A. ONG, MD**  
Assistant Secretary of Health  
COBAC-C, Chairperson

# ELIGIBILITY REQUIREMENTS CHECKLIST

## PROCUREMENT OF VARIOUS GOODS FOR DOH DORMITORY SVP No. 2020-070

ITEM NO.	REQUIREMENTS
A.	Duly accomplished and signed Price Quotation inclusive of all taxes;
B.	Duly accomplished and signed Technical Specifications using the attached form
C.	Duly signed Schedule of Requirements using the attached form;
D.	<p>Mayor's / Business Permit issued by the city or municipality where the principal place of business of the prospective bidder is located or the equivalent document for Executive Economic zones or areas (2016 Revised IRR of RA9184) together with corresponding copy of the receipt of payment of the said permit;</p> <p><b>NOTE:</b> <i>In consideration of the limited access to financial institutions, regulatory and other offices, as well as the implementation of government restrictions on transport and travel, <u>Acceptability of the recently expired Mayor's or Business permits and the Official Receipt as proof that the Bidder has applied and paid for the renewal of the permit ; Provided that, the current and valid Mayor's or Business Permit as renewed, will be submitted by the bidder with the LCRB after the award of contract but before payment (GPPB Circular 09-2020)</u></i></p>
E.	PhilGEPS Registration Number;
F.	Latest Annual Income Tax / Business Tax Return also refers to Value Added Tax or Percentage Tax Return covering the previous six (6) months (if applicable);
G.	Omnibus Sworn Statement;
H.	<p>Duly notarized authority of the signatory using the attached form, whichever is applicable:</p> <ol style="list-style-type: none"> <li>1. Secretary's Certificate (i.e. corporation; joint venture agreement); or</li> <li>2. Special Power of Attorney (i.e. sole proprietor, partnership); or</li> <li>3. In case the signatory is the sole proprietor, copy of the DTI Registration Certificate</li> </ol>

# PRICE QUOTATION

## PROCUREMENT OF VARIOUS GOODS FOR DOH DORMITORY SVP No. 2020-070

Item No.	Item Description	Quantity	Unit	Unit Cost (PhP)	Total Cost (PhP)
1	Single Bed	40	Piece		
2	Blanket	60	Piece		
3	Bedding Set	60	Piece		
4	Pillow	60	Piece		
5	Coffee Table	20	Set		

**Note: Price shall be valid for Ninety (90) calendar days from the Opening of Bids.**

**All price offered (unit price and total bid price) inclusive of all taxes must be type or written in indelible ink.**

After having carefully read and accepted your conditions, I / We quote you on the item at prices noted above.

\_\_\_\_\_  
Signature over Printed Name  
[date of signing]

In the capacity of:  
Duly authorized to sign bid for and on behalf of:

[title or other appropriate designation]  
[Name of Company]  
[Complete office address]  
[Telephone No.]  
[Fax No.]  
[Email Address]

## Technical Specifications

Item	Specification	Statement of Compliance
		<p>Bidders must state here either “Comply” or “Not Comply” against each of the individual parameters of each Specification stating the corresponding performance parameter of the equipment offered. <b><u>Statements of “Comply” or “Not Comply” must be supported by evidence in a Bidders Bid and cross-referenced to that evidence. Evidence shall be in the form of manufacturer’s un-amended sales literature, unconditional statements of specification and compliance issued by the manufacturer, samples, independent test data etc., as appropriate.</u></b> A statement that is not supported by evidence or is subsequently found to be contradicted by the evidence presented will render the Bid under evaluation liable for rejection.</p>

## Technical Specifications

Republic of the Philippines Department of Health <b>TECHNICAL SPECIFICATIONS</b>			
Item No. 1	<b>SINGLE BED</b>	Qty./ Unit	40 pieces
Name of Manufacturer:		Country of Origin:	
Brand:		Model (if applicable):	
<b>Total ABC: PhP260,000.00</b>			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>A. Detailed Technical Specifications:</b>  1. Single bed with 4" thick polyurethane foam 36" x 75" in size  2. On a steel bed frame with headboard  3. One (1) year warranty			
<b>B. Instructions before delivery:</b> 1. <b>Instructions on Inspection and Test for Acceptance:</b> Upon delivery, the goods shall undergo preliminary inspection by DOH-assigned Inspection Team to ascertain the physical condition and acceptability of the finished products. Damaged items must be replaced.			
<b>C. Upon delivery the following should be complied:</b>  1. <b>Packaging Instructions:</b> Standard packaging of the manufacturer			

\_\_\_\_\_  
 Signature over Printed Name

*[date of signing]*

In the capacity of

Duly authorized to sign bid for and on behalf of:

*:[title or other appropriate designation]*

*[Name of Company]*

*[Complete office address]*

*[Contact No.]*

*[Fax No.]*

*[E-mail Address]*



## Technical Specifications

Republic of the Philippines Department of Health <b>TECHNICAL SPECIFICATIONS</b>			
Item No. 2	<b>BLANKET</b>	Qty./ Unit	60 pieces
Name of Manufacturer:		Country of Origin:	
Brand:		Model (if applicable):	
<b>Total ABC: PhP42,000.00</b>			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>A. Detailed Technical Specifications:</b>  1. 60 x 90 inches  2. Soft fabric  3. Not greater than 280 gsm			
<b>B. Instructions before delivery:</b> 1. <b>Instructions on Inspection and Test for Acceptance:</b> Upon delivery, the goods shall undergo preliminary inspection by DOH-assigned Inspection Team to ascertain the physical condition and acceptability of the finished products. Damaged items must be replaced.			
<b>C. Upon delivery the following should be complied:</b>  1. <b>Packaging Instructions:</b> Standard packaging of the manufacturer			

\_\_\_\_\_  
Signature over Printed Name

*[date of signing]*

In the capacity of

Duly authorized to sign bid for and on behalf of:

: [title or other appropriate designation]

[Name of Company]

[Complete office address]

[Contact No.]

[Fax No.]

[E-mail Address]

## Technical Specifications

Republic of the Philippines Department of Health <b>TECHNICAL SPECIFICATIONS</b>			
Item No. 3	<b>BEDDING SET</b>	Qty./ Unit	60 pieces
Name of Manufacturer:		Country of Origin:	
Brand:		Model (if applicable):	
<b>Total ABC: PhP42,000.00</b>			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>A. Detailed Technical Specifications:</b>  1. 1 pc fitted sheet at least (70 x 90cm)  2. 1 pc pillow cover at least (18 x 28 in)  3. Made from 100% Polyester Microfiber			
<b>B. Instructions before delivery:</b> 1. <b>Instructions on Inspection and Test for Acceptance:</b> Upon delivery, the goods shall undergo preliminary inspection by DOH-assigned Inspection Team to ascertain the physical condition and acceptability of the finished products. Damaged items must be replaced.			
<b>C. Upon delivery the following should be complied:</b>  1. <b>Packaging Instructions:</b> Standard packaging of the manufacturer			

\_\_\_\_\_  
Signature over Printed Name

*[date of signing]*

In the capacity of

Duly authorized to sign bid for and on behalf of:

:*[title or other appropriate designation]*

*[Name of Company]*

*[Complete office address]*

*[Contact No.]*

*[Fax No.]*

*[E-mail Address]*

## Technical Specifications

Republic of the Philippines Department of Health <b>TECHNICAL SPECIFICATIONS</b>			
Item No. 4	<b>PILLOW</b>	Qty./ Unit	60 pieces
Name of Manufacturer:		Country of Origin:	
Brand:		Model (if applicable):	
<b>Total ABC: PhP39,000.00</b>			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>A. Detailed Technical Specifications:</b>  1. Dimension: at least (4 x 14 x 24 inches) in thickness x width x length  2. Length should not exceed 25 inches  3. Made from microfiber fabric			
<b>B. Instructions before delivery:</b> 1. <b>Instructions on Inspection and Test for Acceptance:</b> Upon delivery, the goods shall undergo preliminary inspection by DOH-assigned Inspection Team to ascertain the physical condition and acceptability of the finished products. Damaged items must be replaced.			
<b>C. Upon delivery the following should be complied:</b>  1. <b>Packaging Instructions:</b> Standard packaging of the manufacturer			

\_\_\_\_\_  
Signature over Printed Name

*[date of signing]*

In the capacity of

Duly authorized to sign bid for and on behalf of:

*:[title or other appropriate designation]*

*[Name of Company]*

*[Complete office address]*

*[Contact No.]*

*[Fax No.]*

*[E-mail Address]*

## Technical Specifications

Republic of the Philippines Department of Health <b>TECHNICAL SPECIFICATIONS</b>			
Item No. 5	COFFEE TABLE	Qty./ Unit	20 sets
Name of Manufacturer:		Country of Origin:	
Brand:		Model (if applicable):	
<b>Total ABC: PhP50,000.00</b>			
PURCHASER'S SPECIFICATION		STATEMENT OF COMPLIANCE	
<b>A. Detailed Technical Specifications:</b>  1. Coffee table rattan inspired plastic rectangular  2. With 2 pcs monoblock chair with backrest  3. Color: brown  4. Warranty: 1 year			
<b>B. Instructions before delivery:</b> 1. <b>Instructions on Inspection and Test for Acceptance:</b> Upon delivery, the goods shall undergo preliminary inspection by DOH-assigned Inspection Team to ascertain the physical condition and acceptability of the finished products. Damaged items must be replaced.			
<b>C. Upon delivery the following should be complied:</b>  1. <b>Packaging Instructions:</b> Standard packaging of the manufacturer			

\_\_\_\_\_  
Signature over Printed Name

*[date of signing]*

In the capacity of

Duly authorized to sign bid for and on behalf of:

*:[title or other appropriate designation]*

*[Name of Company]*

*[Complete office address]*

*[Contact No.]*

*[Fax No.]*

*[E-mail Address]*

## Schedule of Requirements

The delivery schedule expressed as weeks/months stipulates hereafter a delivery date which is the date of delivery to the project site.

Item No.	Description	Quantity/Unit	Total ABC (PhP)	Delivery Site	Delivery period in Calendar Days
1	Single Bed	40 pieces	260,000.00	Department of Health – Central Office, Supply Depot, San Lazaro Compound, Sta. Cruz, Manila	Thirty (30) calendar days upon receipt of Notice to proceed (NTP)
2	Blanket	60 pieces	42,000.00		
3	Bedding Set	60 pieces	42,000.00		
4	Pillow	60 pieces	39,000.00		
5	Coffee Table	20 sets	50,000.00		
<b>TOTAL</b>			<b>433,000.00</b>		

\_\_\_\_\_  
Signature over Printed Name  
[date of signing]

In the capacity of:  
Duly authorized to sign bid for and on behalf of:

[title or other appropriate designation]  
[Name of Company]  
[Complete office address]  
[Telephone No.]  
[Fax No.]  
[Email Address]

# Omnibus Sworn Statement

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REPUBLIC OF THE PHILIPPINES     )  
CITY/MUNICIPALITY OF \_\_\_\_\_ ) S.S.

## AFFIDAVIT

I, *[Name of Affiant]*, of legal age, *[Civil Status]*, *[Nationality]*, and residing at *[Address of Affiant]*, after having been duly sworn in accordance with law, do hereby depose and state that:

**1. *Select one, delete the other:***

*If a sole proprietorship:* I am the sole proprietor or authorized representative of *[Name of Bidder]* with office address at *[address of Bidder]*;

*If a partnership, corporation, cooperative, or joint venture:* I am the duly authorized and designated representative of *[Name of Bidder]* with office address at *[address of Bidder]*;

**2. *Select one, delete the other:***

*If a sole proprietorship:* As the owner and sole proprietor, or authorized representative of *[Name of Bidder]*, I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]* as shown in the attached duly notarized Special Power of Attorney;

*If a partnership, corporation, cooperative, or joint venture:* I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the bid and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]* as shown in the attached *[state title of attached document showing proof of authorization (e.g., duly notarized Secretary's Certificate, Board/partnership Resolution, or Special Power of Attorney, whichever is applicable)]*;

3. *[Name of Bidder]* is not "blacklisted" or barred from bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;

4. Each of the documents submitted in satisfaction of the request for quotation requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;

5. *[Name of Bidder]* is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

**6. *Select one, delete the rest:***

*If a sole proprietorship:* I am not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a partnership or cooperative:* None of the officers and members of *[Name of Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the

Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a corporation or joint venture:* None of the officers, directors, and controlling stockholders of [Name of Bidder] is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. [Name of Bidder] complies with existing labor laws and standards; and
8. [Name of Bidder] is aware of and has undertaken the following responsibilities as a Bidder:
  - a.) Carefully examine all of the Request for Quotation:
  - b.) Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
  - c.) Made an estimate of the facilities available and needed for the contract to be bid, if any; and
  - d.) Inquire or secure Supplemental/Bid Bulletin(s) issued for the [Name of the Project].
9. [Name of Bidder] did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_ day of \_\_\_\_, 20\_\_ at \_\_\_\_\_, Philippines.

\_\_\_\_\_  
Bidder's Representative/Authorized Signatory

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 20017 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no, \_\_\_\_ and his/her Community Tax Certificate No. \_\_\_\_ issued on \_\_\_\_ at \_\_\_\_.

Witness my hand and seal this \_\_\_\_ day [month] [year].

**NAME OF NOTARY PUBLIC**

Serial No. of Commission \_\_\_\_\_

Notary Public for \_\_\_\_\_ until \_\_\_\_\_

Roll of Attorneys No. \_\_\_\_\_

PTR No. \_\_, [date issued], [place issued]

IBP No. \_\_, [date issued], [place issued]

Doc No. \_\_\_\_\_

Page No. \_\_\_\_\_

Book No. \_\_\_\_\_

Series of \_\_\_\_\_.

\*This form will not apply for WB funded projects.

**REPUBLIC OF THE PHILIPPINES )**  
**CITY OF \_\_\_\_\_ ) S.S.**  
**X-----X**

**SECRETARY'S CERTIFICATE**

I, \_\_\_\_\_, a duly elected and qualified Corporate Secretary of \_\_\_\_\_, a corporation duly organized and existing under and by virtue of the laws of the Republic of the Philippines, with principal office and place of business at [complete office address], **DO HEREBY CERTIFY**, that:

I am familiar with the facts herein certified and duly authorized to certify the same;

At the Regular/Special meeting of the Board of Directors of the said Corporation duly convened and held on [dd mm yy] at which meeting a quorum was present and acted throughout, the following resolution was unanimously approved, and the same have not been annulled, revoked and amended in any way whatever and are in full force and effect on the date hereof:

**(Resolution No. \_\_\_\_\_)**

**RESOLVED**, that \_\_\_\_\_ be, as it hereby is, authorized to participate in the bidding of the [Name of the Project and reference number] by the **DEPARTMENT OF HEALTH (DOH)**; and that if awarded the project shall enter into a contract with the **DOH**; and in connection therewith hereby appoint \_\_\_\_\_, acting as duly authorized and designated representatives of \_\_\_\_\_, are granted full power and authority to do, execute and perform any and all acts necessary and/or to represent \_\_\_\_\_ in the bidding as fully and effectively as the \_\_\_\_\_ might do if personally present with full power of substitution and revocation and hereby satisfying and confirming all that my said representative shall lawfully do or cause to be done by virtue hereof;

**IN WITNESS WHEREOF**, I/We have hereunto set my/our hands this \_\_\_\_ day of [month] [year] at [place of execution].

\_\_\_\_\_  
[Corporate Secretary]

**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_ and his/her Community Tax Certificate No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_.

Witness my hand and seal this \_\_\_\_ day of [month] [year].

**NAME OF NOTARY PUBLIC**

Serial No. of Commission \_\_\_\_\_  
Notary Public for \_\_\_\_\_ until \_\_\_\_\_  
Roll of Attorneys No. \_\_\_\_\_  
PTR No. \_\_, [date issued], [place issued]  
IBP No. \_\_, [date issued], [place issued]

Doc. No. \_\_\_\_  
Page No. \_\_\_\_  
Book No. \_\_\_\_  
Series of \_\_\_\_.



**REPUBLIC OF THE PHILIPPINES )**  
**CITY OF \_\_\_\_\_ ) S.S.**  
**X-----X**

**SPECIAL POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS** that the undersigned [name], [title] of [name of Company], is lawfully authorized to represent and act on behalf of the [name of company], a company registered under the laws of the Republic of the Philippines with its registered office at [complete office address], do hereby **APPOINT, NAME and CONSTITUTE**, [name], [title] of [name of company] as my true and lawful attorney-in-fact to act for and in my name and stead, to do, execute and perform any and all acts necessary and/or represent in the bidding and perform the following acts:

1. To participate and submit a bid to the **DEPARTMENT OF HEALTH** for the Procurement of [Name of Project and reference number].
2. To make, sign, execute, deliver and receive contracts, agreements and any and all documents pertinent thereto, as may be necessary to carry into effect the foregoing authority and to bind myself with the DOH.

**HEREBY GIVING AND GRANTING** unto my said attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite or necessary or proper to be done in and about the premises as fully to all intents and purposes as I might or could lawfully do if personally present, with power of substitution and revocation, and hereby ratifying and confirming all that my said attorney-in-fact shall lawfully do or cause to be done under and by virtue of these presents.

**IN WITNESS WHEREOF**, I/We have hereunto set my/our hands this \_\_\_\_ day of [month] [year] at [place of execution].

\_\_\_\_\_  
[Principal]

\_\_\_\_\_  
[Legal Representative/s]

Attorney-in-Fact SIGNED IN THE PRESENCE OF

\_\_\_\_\_  
\_\_\_\_\_  
**SUBSCRIBED AND SWORN** to before me this \_\_\_\_ day of [month] [year] at [place of execution], Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her [insert type of government identification card used], with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_ and his/her Community Tax Certificate No. \_\_\_\_\_ issued on \_\_\_\_\_ at \_\_\_\_\_.

Witness my hand and seal this \_\_\_\_ day of [month] [year].

**NAME OF NOTARY PUBLIC**

Serial No. of Commission \_\_\_\_\_  
Notary Public for \_\_\_\_\_ until \_\_\_\_\_  
Roll of Attorneys No. \_\_\_\_\_  
PTR No. \_\_, [date issued], [place issued]  
IBP No. \_\_, [date issued], [place issued]

Doc. No. \_\_\_\_  
Page No. \_\_\_\_  
Book No. \_\_\_\_  
Series of \_\_\_\_