

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 Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO under SVP No. 2023-011**

Name of Company

Address

Please submit your lowest price quotation on the lot listed below, duly signed by your representative not later than **19 April 2023; 9:00 A.M.**, Ground Floor, Building No. 6, Department of Health, San Lazaro Compound, Rizal Avenue, Sta. Cruz, Manila:

Lot No.	Description	Qty.	Unit	Total ABC (PhP)
1	Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO	1	lot	150,000.00

Your quotation is subject to the following General Conditions:

- 1. Price validity shall be for a period of <u>Ninety (90)</u> calendar days from the Opening of Bids.
- 2. **Contract Duration:** Corrective and Preventive Maintenance of generator set shall commence immediately upon receipt of Notice to Proceed (NTP), and valid for twelve (12) months.
- 4. **Terms of Payment**: After completion of the project.
- 5. Bidders are entitled to one (1) bid only, otherwise, all bids made shall automatically be rejected.
- 6. 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 including documents signifying compliance with the following requirements:
 - i. Must be in business of generator maintenance services for the past three (3) years (SEC/DTI Registration, Business Permit) and a distributor of the brand of generator set to be serviced in this contract;

- ii. Must have at least three (3) Certified Technician/s with at least three (3) years of work experience in preventive maintenance of generator set;
- iii. Must have attended relevant training within the last three (3) years, (submit certification of the generator technician);
- iv. Proven track record in rendering satisfactory provision of generator maintenance services (submit a copy of certificate of satisfactory rating issued by current or previous client;
- v. Company Profile;
- vi. Technical or Industrial Certification / Capabilities of Firm / Service Provider;
- vii. Curriculum Vitae of Proposed Staff and Certificate of Training with at least three (3) years of work experience; and
- viii. Project schedule and implementation plan

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.

- 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;
- 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

NOTE: Bidders may submit their bid proposal on or before **19 April 2023**, **9:00 AM** to the COBAC-D Secretariat through any of the following options:

- 1. In printed copy to be submitted at the *G/F*, *Bldg*. *No.* 6, *Department of Health, San Lazaro Compound, Sta. Cruz, Manila*; or
- 2. In soft copy via e-mail to **<u>cobacdsecretariat@doh.gov.ph</u>** 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 Revised IRR of RA No.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 Revised IRR of RA No. 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 Revised IRR of RA No. 9184)

Further, once the Community Quarantine 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, Omnibus Sworn Statement and Authority of the Signatory Forms.

Pursuant to Section 62.1 of the 2016 Revised Implementing Rules and Regulations of Republic Act No. 9184, a warranty security shall be required from the contract awardee for a minimum period of three (3) months, in the case of Expendable Supplies, after acceptance by the Procuring Entity of the delivered supplies.

The obligation for the warranty shall be covered by either retention money in an amount equivalent to at least one percent (1%) but not to exceed five percent (5%) of every progress payment, or a special bank guarantee equivalent to at least one percent (1%) but not to exceed five percent (5%) of the total contract price. The said amounts shall only be released after the lapse of the warranty period or, in the case of Expendable Supplies, after consumption thereof: Provided, however, That the supplies delivered are free from patent and latent defects and all the conditions imposed under the contract have been fully met.

ENRIQUE A. TAYAG, MD, PHSAE, FPSMID, CESO III Undersecretary of Health Chairperson, COBAC-D

PRICE QUOTATION

Procurement of Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO SVP No. 2023-011

Lot No.	Description	Qty.	Unit	Unit Cost (PhP)	Total Bid Price (PhP)
1	Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO	1	lot		

Note: Price shall be valid for Ninety (90) calendar days and shall not exceed the ABC.

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 lot at price 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
		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. <u>Statements of "Comply" or</u> "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 <u>specification and compliance issued by</u> the manufacturer, samples, independent test data etc., as appropriate. 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.

Technical Specifications

	Republic of the Phil	11	
	Department of He		
	TECHNICAL SPECIFI	CATIONS	
	Service Provider for the Preventive and		
Lot No. 1	Corrective Maintenance of Generator Set	Quantity /	1 lot
LOUNO. I	(Stamford 750 kva) of the Department of	Unit	1 100
	Health-CO		
Name of M	anufacturer:	Country of Orig	gin:
Brand:			
Total ABC	for the lot: P150,000.00		
Р	URCHASER'S SPECIFICATION	STATEME	NT OF COMPLIANCE
I. Deta	ailed Technical Specification		
A. Prev	ventive Maintenance		
1. Prev	ventive Maintenance Service Level 1		
Syst	em Inspection & Evaluation:		
	general requirement to be performed during PM visit:		
a.	 Cooling System i. Check the amount and condition of coolant/water ii. Check for worn out, broken or loose belt iii. Check hoses/pipes for crack/leak and brittleness iv. Check/inspect radiator fins 		
b.	Fuel System		
	i. Check engine and supply system for any fuel leaksii. Check fuel level and visually inspect for		
	contamination iii. Check fuel hoses/pipes for crack/leak and brittleness		
c.	Air Inlets and Exhaust System		
	i. Inspect air filter elementii. Check air filter indicators for proper operation		
	iii. Ensure that air inlet and outlet is not obstructed		
	iv. Check exhaust system and bracket for possible corrosionv. Check for damaged vibration pads and		
d.	bracket for excess vibrations.		
	 i. Check crank base breather, if applicable ii. Check engine oil quality, leakage / 		

	Republic of the Phili		
	Department of He		
	TECHNICAL SPECIFIC	LATIONS	
Lot No. 1	Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO	Quantity / Unit	1 lot
Name of Ma	nufacturer:	Country of Orig	gin:
Brand:			
	for the lot: P150,000.00		
PU	JRCHASER'S SPECIFICATION	STATEME	NT OF COMPLIANCE
	contamination		
e.	 Starting System Check and inspect starter operation, inspect loose connection Check battery fluid level and verify that the battery terminals are clean Check all battery connection Inspect battery charger operations 		
f.	 Control Panel Visually inspect wiring or components Check all switches and breakers and if applicable, Check engine protective devices and test proper operation 		
g.	 General Visually inspect loose connection and burnt wires Check abnormal sound and generator vibrations, if applicable Conduct safety shutdown and test run with/without load Determine/ get ampere/ current reading with and without load V. Record all parameters 		
h.	Load Test		
2. Prev	entive Maintenance Service Level 2		
Scope a. b. c. d. e.	ge Engine Oil & Air Cleaner Element e of Work: Change Engine Oil Replace Fuel Cock with Filter Replace Air Cleaner Element Dispose of all waste fluids (if applicable) All necessary work under Service Level		
	RECTIVE MAINTENANCE		
A. P			
	is understood that the unit under the agreement in good operating condition on the date the		

	Republic of the Phili		
	Department of He TECHNICAL SPECIFI		
	Service Provider for the Preventive and		
	Corrective Maintenance of Generator Set	Quantity /	
Lot No. 1	(Stamford 750 kva) of the Department of	Unit	1 lot
	Health-CO		
Name of M	lanufacturer:	Country of Orig	gin:
Brand:			
Total ABC	C for the lot: P150,000.00		
	URCHASER'S SPECIFICATION	STATEME	NT OF COMPLIANCE
	agreement becomes effective. Service Provider reserves the right to inspect any unit to be placed in the Preventive Maintenance Agreement to determine its operating condition. Any repair necessary to restore the generator set unit to good working condition before including in the Preventive Maintenance Agreement will be charged to Department of Health.		
	The scope of the program is limited only to visual/simple adjustment and diagnostic inspections, change oil and replacement of oil and fuel filters as well as the submission of findings, recommendations, and quotations. All other activities such as the disassembly of radiator, rewind of main alternator and exciter, pull out of crankshaft oil seal front/rear, installation of water pump, valve clearance adjustment, AVR, Starter and Charging alternators, rewiring harness and or overhauling of the equipment arising from either the normal wear and tear or through the recommendations of the technicians shall be treated separately.		
	Equipment for repair that will be included in the Preventive Maintenance Agreement has no standard repair charge. A separate proposal of these repairs will be charge on a time and replacement parts basis. No repair will be started without the approval of AS/GSD to the proposal/quotation of the Service Provider covering purchase, contract, or job order.		
	In case that some of the equipment for preventive maintenance is declared unserviceable or for condemnation during the service contract for the Service Provider shall report the problem and the preventive maintenance on the equipment will discontinue. A corresponding amount will be deducted proportional to the service being rendered by the service provider.		
В.	Part 2		

Republic of the Philip Department of Heal TECHNICAL SPECIFICA					alth				
	Service Provider for the Preventive and								
Lot I	No 1		orrective Ma					Quantity /	1 lot
Lot	10.1		tamford 750	kva) of	the Dep	partmei	nt of	Unit	1 101
Nam	e of M		ealth-CO acturer:					Country of Orig	pin:
Bran		unun							2
Tota			the lot: P15	· ·					
			CHASER'S S					STATEME	NT OF COMPLIANCE
	ITE 1.	M	DESCRIP Brand New		QTY 2				
	1.		8D with Clan	•	2	pc			
	2.		Battery Charger	Trickle	1	pc			
	3.		Mobilization Demobilizati		1	lot			
II.					attache	ed to Te	chnical	Specifications for	orm arranged, numbered and
	<u>tabb</u>	ed as	s enumerated	below:					
			stration, Busin						ast three (3) years (SEC/DTI erator set to be serviced in this
			t have at least entive mainter				cian/s v	with at least three	(3) years of work experience in
			t have attender rator technicia		nt traini	ng withi	n the 1	last three (3) year	rs, (submit certification of the
					•	•	-	sion of generator i urrent or previous	maintenance services (submit a client;
	5.	Com	pany Profile;						
	6.	Tech	nical or Indus	trial Cert	fication	/ Capabi	ilities o	of Firm / Service P	rovider;
	7. Curriculum Vitae of Proposed Staff and Certificate of Training with at least three (3) years of work experience; and								
	8. Project schedule and implementation plan								
[a	Signature over Printed Name [date of signing]								
In the capacity of:[title or other appropriate designation]Duly authorized to sign bid for and on behalf of:[Name of Company][Complete office address][Telephone No.]					asignation				

[Fax No.] [Email Address]

Schedule of Requirements

The delivery schedule expressed as calendar days stipulates hereafter a delivery date which is the date of delivery to the project site.

Lot Number	Description	Quantity/Unit	Project Location	Contract Duration
1	Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO	1 lot	Department of Health Central Office San Lazaro Compound, Sta. Cruz, Manila	Forty-Five (45) calendar days upon receipt of the Contract and approved Notice to Proceed.

*Please include the attached Terms of Reference with signature of the authorized representative as part of the submission of the bid proposal.

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.] [Email Address]

Terms of Reference

Project Title: Procurement of Service Provider for the Preventive and Corrective Maintenance of
Generator Set (Stamford 750 kva) of the Department of Health-CO
Type of Service: Contract of Service □ Individual Firm
End-User/Client: General Services Division – Administrative Service
• Funding Source: If GOP IF or eign Funded, please specify
□ Others, please specify
• ABC: PhP 150,000.00

I. RATIONALE

The General Services Division – Administrative Service (GSD-AS) is mandated to provide preventive and corrective maintenance for all the Property, Plant and Equipment (PPE) within the DOH-Central Office compound to monitor and provide services to maintain the facility and equipment in good condition to continuously perform its mandate and not to hamper the operations.

Preventive Maintenance is an essential part of cost-effective operation that needs planning/ program of inspection, testing, adjustment, and servicing of Stand by Generator Set. This involves keeping maintenance records so that performance and operating cost can be properly monitored and evaluated. The service provider for Generator Set maintenance shall conduct inspection and Maintenance Service Program, to keep it in optimum performance and reliable in case unscheduled regular power interruption occur.

II. SCOPE OF WORK

A. Preventive Maintenance

1. Preventive Maintenance Service Level 1

System Inspection & Evaluation: The general requirement to be performed during PM SL 1 visit:

a. Cooling System

Check the amount and condition of coolant/water Check for worn out, broken or loose belt Check hoses/pipes for crack/leak and brittleness Check/inspect radiator fins

b. Fuel System

Check engine and supply system for any fuel leaks Check fuel level and visually inspect for contamination Check fuel hoses/pipes for crack/leak and brittleness

c. Air Inlets and Exhaust System

Inspect air filter element Check air filter indicators for proper operation Ensure that air inlet and outlet is not obstructed Check exhaust system and bracket for possible corrosion Check for damaged vibration pads and bracket for excess vibrations.

- d. Lubricating Oil System
- e. Check crank base breather, if applicable

f. Check engine oil quality, leakage / contamination

g. Starting System

Check and inspect starter operation, inspect loose connection Check battery fluid level and verify that the battery terminals are clean Check all battery connection Inspect battery charger operations

h. Control Panel

Visually inspect wiring or components Check all switches and breakers and if applicable, Check engine protective devices and test proper operation

i. General

Visually inspect loose connection and burnt wires Check abnormal sound and generator vibrations, if applicable Conduct safety shutdown and test run with/without load Determine/ get ampere/ current reading with and without load Record all parameters

j. Load Test

2. Preventive Maintenance Service Level 2

Change Engine Oil & Air Cleaner Element Scope of Work:

- a. Change Engine Oil
- b. Replace Fuel Cock with Filter
- c. Replace Air Cleaner Element
- d. Dispose of all waste fluids (if applicable)
- e. All necessary work under Service Level

QUARTERLY PREVENTIVE MAINTENANCE OF GENERATOR SET FOR ONE (1) YEAR

ITE	DESCRIPTION	QTY	UNIT	UNIT	TOTAL
Μ				PRICE	AMOUNT
	PM SERVICE LEVEL 1: Supply of labor,				
1	tools, materials and technical expertise	3	quarter	5,000.00	15,000.00
	for complete check-up and evaluation of				
	one(1) unit 750KVA Stamford Generator				
	Set				
2	PM SERVICE LEVEL 2: Supply of				
	labor, tools, materials and technical				
	expertise for cleaning and sanitation,	1	Quarter	70,000.00	70,000.00
	change oil, change filters (oil, & Fuel				
	Filter), change coolant of one (1) unit				
	750KVA Stamford Generator Set				
	Fan Belt				
3	Water Pump Belt	1	pc	1,000.00	1,500.00
4	Air Filter	1	pc	1,000.00	1,500.00
5	Mobilization & Demobilization	1	pc	6,000.00	5,000.00
6		1	visit	1,000.00	1,000.00
	TOTAL NET PRICE (Vat Inclusive)			· ·	94,000.00

B. CORRECTIVE MAINTENANCE

A. Part 1

- 1. It is understood that the unit under the agreement is in good operating condition on the date the agreement becomes effective. Service Provider reserves the right to inspect any unit to be placed in the Preventive Maintenance Agreement to determine its operating condition. Any repair necessary to restore the generator set unit to good working condition before including in the Preventive Maintenance Agreement will be charged to Department of Health.
- 2. The scope of the program is limited only to visual/simple adjustment and diagnostic inspections, change oil and replacement of oil and fuel filters as well as the submission of findings, recommendations, and quotations. All other activities such as the disassembly of radiator, rewind of main alternator and exciter, pull out of crankshaft oil seal front/rear, installation of water pump, valve clearance adjustment, AVR, Starter and Charging alternators, rewiring harness and or overhauling of the equipment arising from either the normal wear and tear or through the recommendations of the technicians shall be treated separately.
- 3. Equipment for repair that will be included in the Preventive Maintenance Agreement has no standard repair charge. A separate proposal of these repairs will be charge on a time and replacement parts basis. No repair will be started without the approval of AS/GSD to the proposal/quotation of the Service Provider covering purchase, contract, or job order.
- 4. In case that some of the equipment for preventive maintenance is declared unserviceable or for condemnation during the service contract for the Service Provider shall report the problem and the preventive maintenance on the equipment will discontinue. A corresponding amount will be deducted proportional to the service being rendered by the service provider.

ITEM	DESCRIPTION	QTY	UNIT	UNIT	TOTAL
				PRICE	AMOUNT
1.	Brand New Battery 8D with	2 pcs	pcs	19,000.00	38,000.00
	Clamp				
2.	Battery Trickle Charger	1	pc	15,000.00	15,000.00
3.	Mobilization &	1	lot	3,000.00	3,000.00
	Demobilization				
	TOTAL NET PRICE				56,000.00
	(Vat Inclusive)				

B. Part 2

III. TERMS OF PAYMENT

Terms of Payment & Expected Output to support payment

- 1. The Contractor shall bill the Agency after completion of the whole project.
- 2. The Contractor shall submit the invoice, service reports and other supporting documents required by Agency for processing of payment.
- 3. Billing/Payment for extra work rendered and/or supply of parts during emergency or major repairs shall be made separately and shall be done after the End-user's acceptance, subject to usual Audit requirements.

IV. WARRANTY

Provide guarantee period for the workmanship and parts replaced of the repaired units for at least six (6) months. In case the units bogged down while on guarantee period, the Service Provider shall repair the same free of charge including labor, parts and consumables.

V. CONTRACT DURATION, REVIEW AND PENALTY

A. Project Duration

Corrective and Preventive Maintenance of generator set shall commence immediately upon receipt of Notice to Proceed (NTP), and valid for twelve (12) months.

B. Key Performance Indicators (KPIs):

The Service Provider is to achieve the following KPI. An evaluation will be done in every quarter and the DOH will decide to penalize, continue or terminate contract if these KPIs are done adhered with:

- 1. Timely submission of required consolidated reports for preventive maintenance on a monthly basis. (25%)
- 2. Completion of Scope of Works based on the proposed schedule. (25%)
- 3. The equipment that will undergo corrective maintenance should be working properly prior to acceptance of end user and GSD AS. (25%)
- 4. Allowable percentage of recurrence of previous repaired parts -10%.- (25%)

C. Service Performance Monitoring and Evaluation

- 1. Service Provider shall be evaluated by GSD-AS based on the specified KPIs above and provided a copy of evaluation findings and shall obtain at least 85% rating.
- 2. The GSD-AS shall issue a Request for Action (RFA) on whatever findings not in conformance with the terms of reference (TOR) under this contract for corrective action. Any recurring deficiencies made by the Service Provider shall be considered for liquidated damages and potential termination of the contract.

VI. PROJECT LOCATION

Department of Health Central Office San Lazaro Compound, Sta. Cruz. Manila

VII. SERVICE PROVIDER QUALIFICATION

The Service Provider must have the required experience and expertise to carry out generator set services. The following must be submitted as part of the post-qualification:

- 1. Must be in business of generator maintenance services for the past three (3) years (SEC/DTI Registration, Business Permit) and a distributor of the brand of generator set to be serviced in this contract.
- 2. Must have at least three (3) Certified Technician/s with at least three (3) years of work experience in preventive maintenance of generator set.
- 3. Must have attended relevant training within the last three (3) years, (submit certification of the generator technician).
- 4. Proven track record in rendering satisfactory provision of generator maintenance services (submit a copy of certificate of satisfactory rating issued by current or previous client.
- 5. Additional Requirements

- a. Company Profile
- b. Technical or Industrial Certification / Capabilities of Firm / Service Provider
- c. Curriculum Vitae of Proposed Staff and Certificate of Training with at least three (3) years of work experience
- d. Project schedule and implementation plan

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.] [Email Address]

Omnibus Sworn Statement (Revised)

[shall be submitted with the Bid]

REPUBLICOFTHEPHILIPPINES)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, <u>by itself or by relation</u>, <u>membership</u>, <u>association</u>, <u>affiliation</u>, <u>or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting;</u>
- 4. Each of the documents submitted in satisfaction of the bidding 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:*] The owner or sole proprietor is 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 responsibilities as a Bidder in compliance with the Philippine Bidding Documents, which includes:
 - a. Carefully examining all of the Bidding Documents;
 - b. Acknowledging all conditions, local or otherwise, affecting the implementation of the Contract;
 - C. Making an estimate of the facilities available and needed for the contract to be bid, if any; and
 - d. Inquiring or securing 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.

10. In case advance payment was made or given, failure to perform or deliver any of the obligations and undertakings in the contract shall be sufficient grounds to constitute criminal liability for Swindling (Estafa) or the commission of fraud with unfaithfulness or abuse of confidence through misappropriating or converting any payment received by a person or entity under an obligation involving the duty to deliver certain goods or services, to the prejudice of the public and the government of the Philippines pursuant to Article 315 of Act No. 3815 s. 1930, as amended, or the Revised Penal Code.

IN WITNESS WHEREOF, I have hereunto set my h a n d this ______ day of _____, 20 ____at _____, Philippines.

[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE] [Insert signatory's legal capacity] Affiant

[Jurat]

[Format shall be based on the latest Rules on Notarial Practice]

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 Com	mission
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

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.____)

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.PageNo.BookNo.Series of _.

REPUBLIC OF THE PHILIPPINES) CITY OF

S.S.

Х-----Х

SPECIAL POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS that the undersigned [*name*], [*title*] of [*name of* <u>*Company*</u>], is lawfully authorized to represent and act on behalf of the [*name of company*], a company registered underthe laws of the Republic of the Philippines with its registered office at [complete office address], do herebyAPPOINT, NAME and CONSTITUTE, [*name*], [*title*] of [*name of* <u>*company*</u>] 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 todo 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 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 Certificate Tax No. issuedon 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.PageNo.BookNo.Series of

ELIGIBILITY REQUIREMENTS CHECKLIST

Procurement of Service Provider for the Preventive and Corrective Maintenance of Generator Set (Stamford 750 kva) of the Department of Health-CO SVP No. 2023-011

ITEM NO.	REQUIREMENTS
А.	Duly accomplished and signed Price Quotation inclusive of all taxes;
В.	Duly accomplished and signed Technical Specifications using the attached form
B.1	Must be in business of generator maintenance services for the past three (3) years (SEC/DTI Registration, Business Permit) and a distributor of the brand of generator set to be serviced in this contract.
B.2	Must have at least three (3) Certified Technician/s with at least three (3) years of work experience in preventive maintenance of generator set.
B.3	Must have attended relevant training within the last three (3) years, (submit certification of the generator technician).
B.4	Proven track record in rendering satisfactory provision of generator maintenance services (submit a copy of certificate of satisfactory rating issued by current or previous client.
B.5	Company Profile
B.6	Technical or Industrial Certification / Capabilities of Firm / Service Provider
B.7	Curriculum Vitae of Proposed Staff and Certificate of Training with at least three (3) years of work experience
B.8	Project schedule and implementation plan
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;
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;
	Duly notarized authority of the signatory using the attached form, whichever is applicable:
H.	 Secretary's Certificate (i.e. corporation; joint venture agreement); or Special Power of Attorney (i.e. sole proprietor, partnership); or In case the signatory is the sole proprietor, copy of the DTI Registration Certificate