



**REQUEST FOR QUOTATION (RFQ)**

**Supply and Delivery of Various Dental Supplies**

Procuring Entity : DBP Head Office  
Solicitation Number : P-ERD-25-00336  
Date of Posting/Canvass : 07/08/2025  
Deadline of Submission : 07/14/2025 (9:00 AM)  
Approved Budget for the Contract (ABC) : Php 398,483.00

**Kindly refer to the attached Terms of Reference for details and other conditions.**

**Please be guided by the following:**

1. All entries in the proposal/quotation must be typewritten.
2. Price quotation must be based on the Terms of Reference (TOR) / Scope of Work/Services (SOW) / Technical Specifications (TS), as applicable and must be duly signed by the vendor's representative.
3. Price quotation (Unit Cost) must be inclusive of VAT and other applicable taxes/charges.
4. The open price quotation must include the documentary requirements (see below) and must be submitted through the email address below or to the Procurement Unit-PIMD, DBP Head Office, Sen. Gil Puyat Ave., cor. Makati Ave., Makati City.
5. No down-payment or advanced payment.
6. Price quotation with incomplete documentary requirement shall not be considered for evaluation.
7. Signed copy of this RFQ by the supplier's authorized representative should be attached with the submitted proposal.

**Documentary Requirements:**

- Proposal/Quotation;
- Proof of PhilGEPS Registration;
- Mayor's/Business permit for the current year;
- Notarized Omnibus Sworn Statement;
- Secretary's Certificate (for Suppliers under Partnership/Corporation);
- Signed DBP Privacy Consent Form;
- Certificate of Product Registration (if any); and
- License to Operate from FDA

For submission of proposal and any inquiry, you may contact the following personnel:

**LILIBETH F. CASTEN / pimd-pu-gsteam@dbp.ph / 8818-9511 local 2604**



**DEVELOPMENT BANK OF THE PHILIPPINES (DBP)**

**Terms of Reference**

**Mode of Procurement – Small Value Procurement**

**Procurement of Dental Supplies & Instruments**

**I. Approved Budget for the Contract (ABC): P398,483.00** (Inclusive of VAT/applicable taxes and other charges)

**II. Technical Specifications:**

Qty	UOM	Item Description	Unit Price	Total
20	BOX	MICRO APPLICATOR BRUSH TIPS (100'S/BOX) Disposable; superfine	250.00	5,000.00
12	PACK	COTTON ROLL 750 rolls 15 bundles of 50 each Disposable/single use 100% pure white cotton 8mm x 38mm	240.00	2,880.00
12	BOTTLE	MOUTHWASH, CONCENTRATED, 750ML Antiseptic mouthwash Ingredients: water, ethanol, sorbitol, Poloxamer 407, benzoic acid, sodium saccharin, mint flavor, methyl salicylate, thymol, sodium Benzoate, menthol	580.00	6,960.00
12	PACK	POLYBIB 2 ply tissue + 1 ply poly Soft, absorbent tissue and waterproof poly-backing. 100 bibs per pack	220.00	2,640.00
400	PIECE	MATRIX BAND, PREMOLARS #1 Premolar Size; stainless steel	7.50	3,000.00
10000	PIECE	PAPER CUPS, DISPOSABLE 6.5oz; color: white	1.40	14,000.00
15	BOTTLE	POVIDONE IODINE ORAL ANTISEPTIC SOLUTION, 1%, 240ML.	480.00	7,200.00
15	PACK	COTTON BALLS 300 balls per pack	120.00	1,800.00
10	BOX	CELLULOID STRIPS (100 PCS/BX)	40.00	400.00
20	BOX	ARTICULATING PAPER Texture: Thick; clear and soft; any color available	198.00	3,960
2	BOX	DENTAL GLASS IONOMER CEMENT, LUTING Powder 15g Qty: 1 Liquid 10g Qty: 1 Mixing time: 20 seconds Working time: 2 mins	5,000.00	10,000.00

**Procurement of Dental Supplies and Instruments**

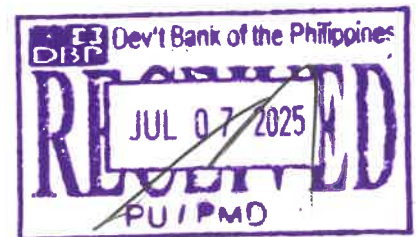
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		Shade: light yellow		
4	BOTTLE	ADHESIVE, SINGLE BOND 6g Moist bonding adhesive containing 10%, 5nm colloidal filler	4,200.00	16,800.00
24	PACK	SALIVA EJECTOR, DISPOSABLE, CLEAR (100 PCS/PACK)	250.00	6,000.00
6	KIT	SYRINGE, LIGHT CURING IONOMETER LINER Fluoride releasing Active ingredient: hydroxyapatite Universal shade radiopaque	980.00	5,880.00
2	BOX	DENTAL GLASS IONOMER CEMENT (GIC), 1-1 PKG Powder 15g Qty: 1 Liquid 10g Qty: 1 Mixing time: 25 to 30 seconds Working Time: 2 mins. Shade No. 21	5,800.00	11,600.00
8	CASE	TISSUE, FACIAL, UNSCENTED, 2PLY 180 pulls/pack; 15 packs/case	1,200.00	9,600.00
2	PACK	ROOT CANAL SEALER, SLOW-SET EUGENOL Powder 15g – Liquid 10ml Kit Radiopaque Antiseptic & Anti-inflammatory Perfect marginal sealing Non resorbable	1,450.00	2,900.00
30	SYRINGE	TOOTH CONDITIONER GEL (ETCHANT) 38% phosphoric acid thixotropic	180.00	5,400.00
6000	PIECE	FACE MASK, DISPOSABLE, EAR LOOP DESIGN 50 masks per box	4.50	27,000.00
20	BOX	GLOVES, DISPOSABLE, NON-POWDERED, EXTRA SMALL Powder free, finger textured, non-sterile, ambidextrous, 50 pairs/box	380.00	7,600.00
12	BOX	POLISHING AND FINISHING STRIPS 170x4mm 100 pieces/box	420.00	5,040.00
30	BOTTLE	DENTAL MIRROR DEFOGGER Anti-moisture 60 ml	120.00	3,600.00
6	SET	NERVE BROACH Barbed broach 020-040 Length 25mm	450.00	2,700.00
12	BOTTLE	CANKER SORE PAIN RELIEF DRESSING 50% sulfonated phenolics and 30% sulfuric acid in aqueous soln.	2,300.00	27,600.00
24	TUBE	TOOTHPASTE, 100ML	120.00	2,880.00
16	TUBE	COCOA BUTTER 10g protection paste	550.00	8,800.00
2	SET	CEMENT, MULTIPURPOSE, TEMPORARY Zinc Oxide Eugenol Cement Powder 5 grms	550.00	1,100.00

**Procurement of Dental Supplies and Instruments**

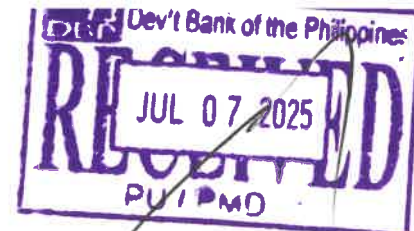
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		Liquid 3 ml		
4	PACK	GUTTA PERCHA POINTS F3, BLUE (120 POINTS PER PACK)	435.00	1,740.00
12	PACK	SANDWICH PLASTIC BAG, WHITE (65 PCS./PACK)	140.00	1,680.00
12	BOTTLE	CHLORHEXIDINE GLUCONATE ORAL RINSE, 380ML 0.12% Chlorhexidine Gluconate in a base containing water, 11.6% alcohol, glycerin, PEG-40 sorbitan diisostearate flavor, sodium saccharin	480.00	5,760.00
1000	PIECE	PROPHY BRUSH, NYLON (PER PIECE) Any color available	7.00	7,000.00
2	PACK	RESIN POWDER, SELF-CURED 120g, pink	120.00	480.00
10	PIECE	INSTRUMENT BOX High quality plastic; non-toxic; autoclavable Size: 20cmX4.5cm	150.00	1,500.00
2	PIECE	ROOT CANAL SEALER, CALCIUM HYDROXIDE 2 grams	1,800.00	3,600.00
60	PIECE	INVERTED DIAMOND CONE BUR 20 pcs size 8A 20 pcs SIZE 8 20 pcs SIZE 8B	50.00	3,000.00
8	SYRINGE	SEALANT, PIT AND FISSURE 1.2ml/syringe Fluoride releasing; light cured	1,400.00	11,200.00
2	BOTTLE	RESIN LIQUID, SELF-CURED 60ml/bottle	80.00	160.00
60	BOTTLE	DENTAL INSTRUMENT DISINFECTANT, 30ML	120.00	7,200.00
20	BOX	GLOVES, DISPOSABLE, NON-POWDERED, MEDIUM Powder free, finger textured, non-sterile, ambidextrous, 50 pairs/box	380.00	7,600.00
80	PIECE	ROUND DIAMOND BUR 20 pcs #1A 20 pcs #1B 20 pcs #2 20 pcs 2A	50.00	4,000.00
200	PIECE	STERILIZATION POUCH Medium size Size:5-1/3"x10" (135mmX260mm)	5.00	1,000.00
40	PIECE	RESTORATIVE DENTAL INSTRUMENT, PER TECHNICAL SPECIFICATIONS 10 Egg and ball burnisher 10 Plugger and condenser 10 Spoon shaped excavator 10 Composite resin filling spatulas double headed	500.00	20,000.00
10	PIECE	COTTON PLIER W/ LOCK Stainless steel	130.00	1,300.00

**Procurement of Dental Supplies and Instruments**

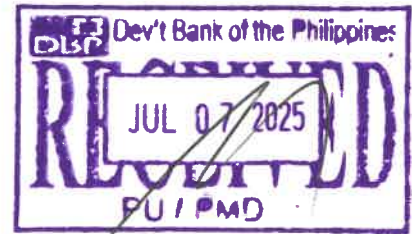
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20	PIECE	DENTAL ULTRASONIC SCALER INSTRUMENT, PER SPECIFICATIONS Stainless steel dental ultrasonic scaler tips Friction resistant, resists break and rust 8 pcs. P1 6 pcs. G1 6 pcs. G4	800.00	16,000.00
2	UNIT	DENTAL HANDPIECE, LOW SPEED <ul style="list-style-type: none"> <li>Bur Size: 2.345-2.355mm</li> <li>Chuck Type: Latch type</li> <li>Rotation Speed: ≥18,000rpm</li> <li>Noise: ≤70db</li> </ul>	8,500.00	17,000.00
4	PIECE	SURGICAL MAYO SCISSORS Stainless steel, medical grade	280.00	1,120.00
6	PIECE	DENTAL HANDPIECE, HIGH SPEED <ul style="list-style-type: none"> <li>Mini head with LED light</li> <li>4 point anti-back design, avoid cross contamination</li> <li>Slender head and body, appropriate for all patients</li> <li>Dual cellular glass optics</li> <li>Air pressure: 0.25-0.32Mpa</li> <li>Bur Size: 1.59-1.6mm</li> <li>Chuck Type: Push button</li> <li>Max. Torque: ≤60 db</li> <li>Rotation speed: 300-450 rpm</li> </ul>	11,000.00	66,000.00
30	PIECE	BASIC DENTAL INSTRUMENT, PER TECHNICAL SPECIFICATIONS 10 pcs explorer 10 pcs mouth mirror 10 pcs spoon shaped excavator 10 pcs cotton plier	500.00	15,000.00
40	PIECE	RESTORATIVE BUR, PER TECHNICAL SPECIFICATIONS: Diamond polishing and finishing burs TF 11 – 8 pcs FO 30F – 8 pcs FO 32EF – 8pcs FO 40EF -8 pcs TC 26 – 8 pcs	80.00	3,200.00
2	PIECE	COTTON ROLL HOLDER, PER SPECIFICATIONS Stainless steel	300.00	600.00
3	PIECE	STERILIZING TRAY, PER TECHNICAL SPECIFICATIONS Medium size Stainless steel (9 inch) 22.5 x 16 x 5cm box With Lid	1,200.00	3,600.00

**Procurement of Dental Supplies and Instruments**

Conforme: \_\_\_\_\_  
Signature over Printed Name



### III. Conditions of the Contract

1. The supplier shall ensure that the items delivered are in accordance with the specifications required by the DBP dental team of the Health & Wellness Unit
2. The DBP may terminate/cancel Purchase Order (PO) if the supplier fails to deliver, perform, and comply with its obligation.
3. The expiry date of dental supplies delivered must be at least two (2) years from the delivery date.
4. **Delivery Period:** The supplier shall deliver the items within twenty (20) calendar days after the receipt of Notice to Proceed (NTP).
5. **Point of Delivery:** DBP Head Office Building, Basement, Receiving section of the Inventory Management Department (IMU-PIMD), Sen. Gil J. Puyat cor. Makati Ave., Makati City in coordination with the Dental Team of the Health & Wellness Unit.

### IV. Interested Supplier/s must submit the following Documentary Requirements:

1. Proposal/quotation
2. Proof of PhilGEPS registration
3. 2025 Mayor's/Business Permit
4. Omnibus Sworn Statement
5. Secretary's Certificate (for supplier under partnership/corporation)
6. Signed DBP Data Privacy Consent Form
7. Submission of Certificate of Product Registration (if any) and license to operate from FDA.

### V. Payment:

1. Payment shall be processed after completion of delivery and subject to submission of the complete documents for payment (such as: Invoice, public bidding only as per latest guidelines/Billing Statement/Statement of Account, Certificate of Acceptance/Completion, as applicable)
2. For every day of delay, 1/10 of 1% (0.001) of the price of undelivered quantity shall be deducted from the payment in case the Supplier fails to deliver the items on time. Once the cumulative amount of liquidated damages reaches ten percent (10%) of the amount of the PO, the DBP may rescind or terminate the contract, without prejudice to other courses of action and remedies open to it.

Conforme: \_\_\_\_\_  
Signature over Printed Name

### Procurement of Dental Supplies and Instruments

Recommended by:

SIGNED  
**AVP ALEX F. OLIVAREZ**  
Head, Health & Wellness Unit

Approved by:

SIGNED  
**VP HEIDI G. MACASAET**  
Officer-In-Charge, Employee Relations Department  
(Per Office Order No. 3458 dtd. 11 November 2024)



Conforme: \_\_\_\_\_  
Signature over Printed Name

**Procurement of Dental Supplies and Instruments**





Name of Project	
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I, \_\_\_\_\_, (Address) \_\_\_\_\_,  
(Contact Number) \_\_\_\_\_, (Email Address) \_\_\_\_\_ hereby authorize/consent to the processing of personal and other related business information which I voluntarily provided to the **Development Bank of the Philippines (DBP)** and understand, acknowledge and agree to the following specific purposes and terms:

I authorize DBP for **processing**<sup>1</sup> and using my personal and other related business information, including but not limited to my name, address, contact details, and any other relevant information necessary for the evaluation process.

I understand that appropriate security measures shall be implemented by DBP for the protection of my personal and other related business information and shall be treated confidentially. Similarly, such information shall only be disclosed to authorized personnel involved in the bids and awards process of DBP.

I acknowledge that my personal and other related business information may be retained by DBP for as long as deemed necessary to fulfill the purposes specified/stated in this consent form, or as required by applicable policies, laws or regulations.

I understand that I have the right to access and request correction of my personal and other related business information held by DBP to correct any error and inaccuracy, in accordance with applicable data privacy laws.

I understand that I have the right to withdraw my consent, and request DBP to stop the **processing** of my personal and business information which may cease/ terminate/ discontinue the evaluation and other related procurement processes.

I agree that any confidential information obtained during my participation in the bid and procurement procedures shall not be disclosed to any third party other than its intended purpose.

By signing below, I acknowledge that I have read and understood the terms and purposes of this consent form and agree to the **processing** of my personal and other related business information as described.

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

\_\_\_\_\_  
Date Signed

**ADDITIONAL INFORMATION**

For inquiries or complaints, you may contact the Development Bank of the Philippines (DBP), Attention to: the **DBP Data Protection Officer or the DBP Customer Experience Management Department**, Sen. Gil J. Puyat Ave. cor. Makati Ave., Makati City, Philippines, Telephone No. (02) 8818-9511 to 20/ (02) 8818-9611 to 20, email: [info@dbp.ph](mailto:info@dbp.ph).

<sup>1</sup>PROCESSING - refers to any operation or any set of operations performed upon personal data including but not limited to, the collection, recording, organization, storage, updating or modification, retrieval, consultation, use, consolidation, blocking, erasure or destruction of data.



## Omnibus Sworn Statement

*[shall be submitted with the Bid]*

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, **by itself or by relation, membership, association, affiliation, or controlling interest with another blacklisted person or entity as defined and provided for in the Uniform Guidelines on Blacklisting;**

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 hand this \_\_ day of \_\_, 20\_\_ at \_\_\_\_\_, Philippines.

*[Insert NAME OF BIDDER OR ITS AUTHORIZED REPRESENTATIVE]*

*[Insert signatory's legal capacity]*  
Affiant

**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.

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 \_\_\_\_\_