



Republic of the Philippines
 Department of Health
METRO MANILA CENTER FOR HEALTH DEVELOPMENT

NOTICE OF AWARD

JAN 31 2023

THE MANAGER
SGS Healthcare Co.
 San Vicente 2001 Bacolor Pampanga Philippines

Dear Sir/Madam:

The Department of Health Metro Manila Center for Health Development through its Bids and Award Committee hereby award to **SGS Healthcare Co.** for the **Procurement of 350 pcs Adult Wheelchairs** in the amount of **One Million Four Hundred Fifty-Six Thousand Pesos (1,456,000.00)**

You are hereby requested to post your Performance Security equivalent to the percentage of the total Contract Price of the acceptable forms as listed within ten (10) calendar days from the receipt of the Notice of Award (NOA). You may choose what form of performance bond you will submit. Please refer to your Philippine Bidding Document Section 33.2

Form of Performance Security	Amount of Performance Security (Not less than the Percentage of the Total Contract Price)
(a) Cash or cashier's/manager's check issued by a Universal or Commercial Bank. <i>For biddings conducted by the LGUs, the Cashier's/Manager's Check may be issued by other banks certified by the BSP as authorized to issue such financial instrument.</i>	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. <i>For biddings conducted by the LGUs, the Bank Draft/ Guarantee or Irrevocable Letter of Credit may be issued by other banks certified by the BSP as authorized to issue such financial instrument.</i>	
(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%)

Please bear in mind that failure to provide the performance security shall constitute sufficient ground for recession of award.

Very truly yours,

ALELI ANNE GRACE P. SUDIACAL, MD, MPH, CESE
 Director IV

Conforme:

(Name and Signature of Company Representative)

SGS Healthcare Co.

(Company Name of Bidder)

Date: 2-2-23