



# PROVINCIAL GOVERNMENT OF DAVAO DE ORO

Cabidanan, Nabunturan, Davao de Oro

## TECHNICAL SPECIFICATIONS FORM

Purchase Request Number: 25-C0161

Bid Number: B-25-0050

Date: 02/24/2025

Page: 1 of 3

ITEM NO.	QTY.	UNIT OF ISSUE	DESCRIPTION	APPROVED BUDGET		BID PRICES	
				Unit Price	Total Amount	Unit Price	Total Amount
1	30000.0	kl/s	<p>Collection of Hospital Waste</p> <p>TERMS AND CONDITIONS AND SPECIFICATION</p> <p>A.) Collection and proper disposal of healthcare wastes such as but not limited to:</p> <ol style="list-style-type: none"> <li>1.) Infectious Wastes</li> <li>2.) Sharps and Needles</li> <li>3.) Glass and ampules</li> <li>4.) Pathological wastes</li> <li>5.) Pharmaceutical and Geno-toxic wastes.</li> </ol> <p>B.) Treatment Storage Disposal (TSD) facility must have an approved sanitary landfill.</p> <p>C.) Transporter and TSD facility should be of the same company or entity and must be accredited with EMB-DENR Region XI.</p> <p>D.) The TSD service must ensure to provide the following requirements and must assists the hospital for the processing of Permit to Transport (PTT) application:</p> <ol style="list-style-type: none"> <li>d.1) Material Safety Data Sheet (if applicable);</li> <li>d.2) Result of Laboratory Analysis (if applicable);</li> <li>d.3) Transporter Registration Certificate;</li> <li>d.4) Transporter Management Plan;</li> <li>d.5) Schedule of hauling/Transport of waste;</li> <li>d.6) Route of Transport;</li> <li>d.7) TSD Registration Certificate;</li> <li>d.8) Permit to Operate the TSD Facility;</li> <li>d.9) Discharge Permit of the TSD Facility;</li> <li>d.10) Environmental Compliance Certificate (ECC) of the TSD Facility.</li> </ol> <p>E.) Prior to disposal, the TSD should issue a Certificate of Treatment and Final Disposal to the hospital.</p> <p>F.) Deployment of properly trained waste handlers must be provided with proper immunization, complete prescribed uniform, identification, and required personal protective equipment (PPE) including heavy-duty gloves, coveralls, and thick soiled boots.</p> <p>G.) Secure the personnel's need for appropriate Personal Protective</p>	50.00	1,500,000.00		
SUB-TOTAL					1,500,000.00		
<p>Purpose: FOR THE USE OF DDOPH-MONTEVISTA AND DDOPH-PANTUKAN(COLLECTION OF HOSPITAL WASTE) 1ST QUARTER</p> <p>Delivery: DDOPH-MONTEVISTA AND DDOPH-PANTUKAN</p> <p>Period of Delivery: AS PER REQUEST</p>							



25-C0161

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ITEM NO.	QTY.	UNIT OF ISSUE	DESCRIPTION	APPROVED BUDGET		BID PRICES	
				Unit Price	Total Amount	Unit Price	Total Amount
			<p>Equipment (PPE) against sharp and infectious body fluids. Any injury sustained by each personnel will be charged to the service provider's account.</p> <p>H.) Payment Scheme shall be on a progress billing on a monthly basis (30 days).</p> <p>H.1 The following are the essential requirements for the attachment when processing the bill for payment:</p> <ul style="list-style-type: none"> <li>- Permit to Transport</li> <li>- Waste Manifest Form</li> <li>- Photocopy of Environmental Compliance</li> <li>- Certificate (Sanitary Landfill) accredited by the DENR-EMB</li> <li>- Certificate of Treatment (COT) issued by EMB-DENR, TERMS AND CONDITIONS AND SPECIFICATION</li> </ul> <p>A.) Collection and proper disposal of healthcare wastes such as but not limited to:</p> <ol style="list-style-type: none"> <li>1.) Infectious Wastes</li> <li>2.) Sharps and Needles</li> <li>3.) Glass and ampules</li> <li>4.) Pathological wastes</li> <li>5.) Pharmaceutical and Geno-toxic wastes.</li> </ol> <p>B.) Treatment Storage Disposal (TSD) facility must have an approved sanitary landfill.</p> <p>C.) Transporter and TSD facility should be of the same company or entity and must be accredited with EMB-DENR Region XI.</p> <p>D.) The TSD service must ensure to provide the following requirements and must assists the hospital for the processing of Permit to Transport (PTT) application:</p> <ol style="list-style-type: none"> <li>d.1) Material Safety Data Sheet (if applicable);</li> <li>d.2) Result of Laboratory Analysis (if applicable);</li> <li>d.3) Transporter Registration Certificate;</li> <li>d.4) Transporter Management Plan;</li> <li>d.5) Schedule of hauling/Transport of waste;</li> <li>d.6) Route of Transport;</li> </ol>				
<b>GRAND TOTAL</b>					1,500,000.00		
Purpose: FOR THE USE OF DDOPH-MONTEVISTA AND DDOPH-PANTUKAN(COLLECTION OF HOSPITAL WASTE) 1ST QUARTER Delivery: DDOPH-MONTEVISTA AND DDOPH-PANTUKAN Period of Delivery: AS PER REQUEST							



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ITEM NO.	QTY.	UNIT OF ISSUE	DESCRIPTION	APPROVED BUDGET		BID PRICES	
				Unit Price	Total Amount	Unit Price	Total Amount
			d.7) TSD Registration Certificate; d.8) Permit to Operate the TSD Facility; d.9) Discharge Permit of the TSD Facility; d.10) Environmental Compliance Certificate (ECC) of the TSD Facility.  E.) Prior to disposal, the TSD should issue a Certificate of Treatment and Final Disposal to the hospital.  F.) Deployment of properly trained waste handlers must be provided with proper immunization, complete prescribed uniform, identification, and required personal protective equipment (PPE) including heavy-duty gloves, coveralls, and thick soiled boots.  G.) Secure the personnel's need for appropriate Personal Protective Equipment (PPE) against sharp and infectious body fluids. Any injury sustained by each personnel will be charged to the service provider's account.  H.) Payment Scheme shall be on a progress billing on a monthly basis (30 days). H.1 The following are the essential requirements for the attachment when processing the bill for payment: H.1 Permit to Transport H.2 Waste Manifest Form. H.3 Photocopy of Environmental Compliance Certificate (Sanitary Landfill) accredited by the DENR-EMB. H.4 Certificate of Treatment (COT) issued by EMB-DENR.				
GRAND TOTAL					1,500,000.00		

Purpose: FOR THE USE OF DDOPH-MONTEVISTA AND DDOPH-PANTUKAN(COLLECTION OF HOSPITAL WASTE) 1ST QUARTER

Delivery: DDOPH-MONTEVISTA AND DDOPH-PANTUKAN

Period of Delivery: AS PER REQUEST