

BIL	Quotation Reference	Description	Advertisement Date	Closing Date (Not Later Than 09.00AM)	Quotation Fee	Requesting Department	Focal Person
2	PPM/PROC/2024/<50K/018(FPU) - IKN	<p><b>"TO SUPPLY AND DELIVER AUTOCLAVABLE BIOHAZAARD BAG (PP) FOR LAB MEDICAL STORE, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH</b></p> <p><u>PLACE OF SUBMISSION:</u>                      QUOTATION BOX (GROUND FLOOR)                      MINISTRY OF HEALTH                      COMMONWEALTH DRIVE                      BANDAR SERI BEGAWAN, BB 3910                      NEGARA BRUNEI DARUSSALAM</p>	31/07/2024	17/08/2024	\$5.00	JABATAN PERKHIDMATAN MAKMAL, KEMENTERIAN KESIHATAN.	SITI LIYANA NADIA BINTI RAFAHEH  FINANCE AND PROCUMENT UNIT (LABORATORY MEDICAL STORE)  TEL: 2221821 ext. 103/105

**ITEM(S) SPECIFICATIONS FOR ADVERTISEMENT (ABOVE \$2000)**

<b>TENDER REFERENCE NO:</b>	
<b>TENDER NAME:</b>	TO SUPPLY AND DELIVER AUTOCLAVABLE BIOHAZARD BAG (PP) FOR LAB MEDICAL STORE, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH

USER'S REQUIREMENTS				VENDOR'S OFFER					
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKAGING SIZE	TOTAL ESTIMATE USAGE / YEAR	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKAGING SIZE	TOTAL QUANTITY OFFERED / YEAR	*COST PER UNIT (B\$)	TOTAL COST S (B\$)
1	<b>Autoclavable Biohazard Bag (PP)</b> <ul style="list-style-type: none"> <li>• Dimensions (W x L): 25" x 35" with silicone ring</li> <li>• Sterilization Indicator</li> <li>• Material: PP (Polypropylene)</li> <li>• Closure Type: Elastic steam venting</li> <li>• Includes: Printed in English and Spanish</li> <li>• Temperature Range (English): 285°F</li> <li>• Thickness (English): 2 mil</li> <li>• Autoclavable: Yes</li> <li>• Certifications/Compliance: OSHA, 29 CFR1910.1030</li> <li>• Temperature Range (Metric): 140°C</li> <li>• Color: Printed Clear</li> <li>• Packing Size: 100 pieces per pack</li> </ul>	100 pieces/ pack	5,000 pieces						

NO	SPECIFICATIONS AND REQUIREMENTS	VENDOR'S OFFER (PLEASE STATE)
1	All the consumables supplied throughout this tender <u>must</u> have a minimum shelf life of one (1) year. Any consumables / accessories with shelf life less than one (1) year will be rejected. Should the consumables / accessories be urgently needed, provision of a reagent test kit or consumable with expiry date of less than one (1) year should be first agreed by the User of the particular laboratory before delivery is made.	
2	Letter of Undertaking (LOU) shall be produced upon each delivery of consumable with expiry date of less than one (1) year and vendor shall declare in the LOU that unused, unopened, expired kits will be replaced accordingly.	
3	<b>ALL PARTICIPATING VENDORS ARE REQUESTED TO SUBMIT SAMPLE(S) TOGETHER WITH THE QUOTATION OR DURING USER'S EVALUATION PERIOD. SAMPLE(S) SHOULD BE DELIVERED DIRECTLY TO THE USER NOT LATER THAN ONE (1) WEEK AFTER THE CLOSING DATE OF THIS ADVERTISEMENT.</b>	
3	<b>Leaflet, brochure or information related to the named consumables must be attached together with the quotation.</b>	
4	All costs incurred for the supply and delivery of the named consumable will be borne by the successful vendor.	
5	User shall have the rights to refuse delivery of items that do not meet the acceptance criteria such as, but not limited to, the following: 1. Tampered or damaged box	

	<ol style="list-style-type: none"> <li>2. Items stored pre-delivery not in accordance to manufacturer's instructions</li> <li>3. Expiry date not meeting requirement</li> </ol>	
6	<p>User shall have the rights to return any items, and to be replaced at no extra cost, if found not meeting the acceptance criteria upon opening a pack such as, but not limited to, the following:</p> <ol style="list-style-type: none"> <li>1. Tampered or damaged packaging</li> <li>2. Expired products that are evidently less than the requirement mentioned in para 1 calculated from delivery date</li> <li>3. Any evidence of fungal growth that affect the quality of goods</li> </ol>	
7	<b>FINANCIAL AGREEMENT</b>	
7.1	Supply of the test kit including reagents, consumables and/or accessories is based on the number of kits required in the Purchase Order according to an agreed schedule period as stated in para 4.	
7.2	Buffer stock of the test kit including reagents, consumables and accessories shall be available at the local representative as contingency.	
7.3	Should there be any discontinuity of reagents / consumables due to non-compliance in the manufacturing of reagents; the vendor must be able to provide an alternative so that the test requests / services are still available for the customers.	
8	<p><b>EXIT CLAUSE:</b></p> <p>The tender contract shall be automatically terminated even though tender has not yet expired and this shall be in effect due to, but not limited to, the following:</p> <ol style="list-style-type: none"> <li>1. When the testing is no longer required or relevant i.e. test is obsolete, to the laboratory or the Department.</li> <li>2. When the item(s) set out in this tender is/are no longer required by the laboratory or the Department.</li> <li>3. When the approved budget allocation for this tender contract has been used up before the tender contract expires whereby a renewal of tender shall be submitted by the user for an open advertisement subject to approval by the Mini Tender Board (<i>Lembaga Tawaran Kecil</i>).</li> </ol>	

<b>9</b>	<b>DELIVERY PERIOD:</b> Preferably 4 – 8 weeks and no later than 12 weeks after issue of Purchase Order	(Yes / No)  (If No, please specify)
<b>10</b>	<b>PRICE VALIDITY:</b> The quotation shall remain valid for <b>6 MONTHS</b> from the final date for the submission of the quotation and no supplier may withdraw his/her quotation within that period. The Government reserves the right to extend this period if deemed necessary provided that such extension to the quotation validity period shall have written consent of the supplier(s).	

<b>DELIVERY PERIOD AFTER PO ISSUED</b>	<b>4 – 8 weeks and no later than 12 weeks after issue of Purchase Order</b>		
Lab/Section/Unit	<b>FINANCE AND PROCUREMENT UNIT (LABORATORY MEDICAL STORE)</b>		
Lab/Section/Unit Ref No.:	<b>DLS/PU/LMS/2024/B50K/02</b>		
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<b>FOR ADMINISTRATION USE ONLY</b>			
PPM/PROC Ref.No.	<i>PPM / PROC 12024 / &lt;50K / 018 (FP4)</i>		
Advertisement Ref. No.		Date	: