

REFERENCE OF TENDER	DESCRIPTION OF TENDER	TIME PERIOD OF TENDER	DEPARTMENT/DIVISION/UNIT REQUESTING TENDER	FEES	CLOSING DATE NOT LATER THAN 2.00PM	FOCAL PERSON
KK/222/2024/JPKAS(TC)	CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL SERVICES FOR FOREIGN WORKERS HEALTH SCREENING AND VACCINATION CENTRE FOR A PERIOD OF THREE(3) YEARS	3 YEARS	DEPARTMENT OF ENVIRONMENTAL HEALTH SERVICES	\$30.00	22 <sup>ND</sup> OCT 2024	<i>Procurement Officer  Department of Environmental Health Services  Ministry of Health  Negara Brunei Darussalam  Contact No: 7916/7871</i>

**NOMBOR TAWARAN: KK/222/2024/JPKAS(TC)**

**KEMENTERIAN KESIHATAN  
NEGARA BRUNEI DARUSSALAM**

**CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL  
SERVICES FOR FOREIGN WORKERS HEALTH SCREENING AND  
VACCINATION CENTRE FOR A PERIOD OF THREE(3) YEARS**

**YURAN TAWARAN: \$30.00**

**NOMBOR RESIT :**

**TARIKH TUTUP : HARI SELASA, 22HB OKTOBER 2024**

**JAM : 2.00 PETANG**

**KEPADA :**

**PENGERUSI LEMBAGA TAWARAN KECIL  
PETI TAWARAN, TINGKAT BAWAH  
BANGUNAN KEMENTERIAN KESIHATAN  
COMMONWEALTH DRIVE  
BANDAR SERI BEGAWAN BB 3910  
NEGARA BRUNEI DARUSSALAM**

**(CLUSTERING)**

## SECTION 2

### SPECIFICATIONS

TENDER REFERENCE NO.: KK/222/2024/JPKAS(TC)

#### INVITATION TO TENDER

#### CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL SERVICES FOR FOREIGN WORKERS HEALTH SCREENING AND VACCINATION CENTR FOR A PERIOD OF THREE (3) YEARS

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The Contractor shall:

##### Collection Points

1. Carry out collection and disposal of clinical/biohazard wastes from Foreign Workers Health Screening and Vaccination Centre (2 times per week)

(Hereinafter collectively referred to as “the Collection Points” and individually as “the Collection Point”)

##### Scope of Works

2. To supply all labour, personal protection equipment and transport deemed necessary even if not specifically mentioned for collection and delivery of clinical/biohazard wastes for a period of three (3) years.
3. All the clinical/biohazard wastes collection from the health centres and clinics should be **deliver to the incinerator Plant Room at Raja Isteri Pengiran Anak Saleha (RIPAS) Hospital or any designated incinerator plant rooms within the state of Negara Brunei Darussalam.**

##### General Requirement

The intent of the packaging and transportation regulations i.e to prevent accidental exposure of personnel who may handle the clinical/biohazard waste during its transportation. Therefore, there are certain general criteria which apply to all possible transport scenarios. Prior to collection and transporting and medical wastes the following controls must be place:

4. Emergency procedures (e.g contact names and information, spill clean-up, disinfection protocols, etc) must be known to the person carrying for the medical wastes.
5. Plastic bags/ containers (Bio Hazards) must be appropriate for the clinical/biohazard wastes being transported.
6. The plastic bags/ containers must be properly labeled.
7. Proper protective clothing must be worn during the packaging and handling of the medical wastes.
8. Hands should be washed after handling medical wastes.
9. Avoid spillage of any liquids forms, needles, and etc. during packing and handling.

##### Transport Between Origin and Destination

Due to the fact that the transportation of clinical/biohazard wastes between locations take place through the public domain, the following conditions apply:

10. The medical waste shall be placed inside a primary container with a tight – fitting leak-resistant lid top cover.
11. The surfaces of the primary container must be easily cleaned.
12. The containers should be carefully inspected for sign of leakage or other contamination and if necessary, decontaminated before opening.
13. Upon delivery, the receiving personnel (Estate Maintenance Section, RIPAS Hospital) should be informed and the clinical/biohazard waste properly stored before incinerated.

#### **Failure to Collect**

14. The Management of Department of Environmental Health Services reserves the right to impose a penalty/ penalty of **\$50 per day per Collection Point** in the event the Contractor fails or is unable to carry out the services within the time specified.

#### **Claims**

15. The Contractor shall prepare and submit invoices **on a monthly basis** not later than the first week of the following month and address to:

***Director of Environmental Health Services,  
Department of Environmental Health Services  
Ministry of Health  
Bandar Seri Begawan  
Negara Brunei Darussalam***

**SCHEDULE 1**

**TENDER FORM**

**TENDER REFERENCE NO.: KK/222/2024/JPKAS(TC)**

**INVITATION TO TENDER**

**CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL SERVICES FOR FOREIGN WORKERS HEALTH SCREENING AND VACCINATION CENTR FOR A PERIOD OF THREE (3) YEARS**

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TENDER OF (name of tenderer) \_\_\_\_\_

Company/Business Registration No. \_\_\_\_\_

Tender Closing Date: \_\_\_\_\_

<b>ITEM</b>	<b>DESCRIPTION</b>	<b>QTY</b>	<b>UNIT</b>	<b>RATE (PER COLLECTION)</b>	<b>AMOUNT (B\$)</b>
(i)	Foreign Workers Health Screening	2	collection time per week		
(ii)	Vaccination Centre	2	collection time per week		
	Total Contract Amount Per Week ( i + ii)				
	Total Contract Amount Per Month ( x 4) + (iv)				
	Total Annual Contract Amount (x 12)				
	<b>Total Overall Contract Amount for 3 years (x 3) (Carried to Tender Form)</b>				

**Note: The Contractor shall ensure that any matters concerned the above services are to be communicated directly to the relevant Management (Management of Department of Environmental Health Services) including pricing, claims/payment and collection schedule.**

1. We offer and undertake on your acceptance of our Tender to provide the above mentioned services in accordance with your Invitation To Tender.
2. Our Tender is fully consistent with and does not contradict or derogate from anything in your Invitation To Tender. We have not qualified or changed any of the provisions of your Invitation To Tender.
3. We shall execute a formal agreement in the appropriate form set out in Section 4 – Contract of the Invitation to Tender together with such further terms and conditions, if any, agreed between the Government and us.
4. OUR OFFER IS VALID FOR TWELVE (12) CALENDAR MONTHS FROM THE TENDER CLOSING DATE.
5. When requested by you, we shall extend the validity of this offer.
6. We further undertake to give you any further information which you may require.

Dated this                      day of                      2024.

\_\_\_\_\_  
**Signature of authorised officer of Tenderer**

Name:

Designation:

Tenderer's official stamp:

## SCHEDULE 2

### INFORMATION SUMMARY

1.1 Tenderers shall provide in this Schedule the following information:

(a) Management summary

(b) Company profile (including Contractor and sub-contractor(s), if any)

(c) Years of experience (as of the Tender Closing Date) of the Contractor and sub-contractor(s) in the:

- ***Provision of Clinical/Biohazard Waste Collection and Disposal Service.***

(d) Other information which is considered relevant

**SCHEDULE 3 – SUB-CONTRACTS**

- 3.1 Tenderers shall complete Table 3.1 with information about all the companies involved in the provision of the services and items specified in this tender. This shall include details about the Contractor and each sub-contractor involved, as well as their respective responsibilities.
  
- 3.2 Tenderers shall also indicate in Table 3.1 any alliance relationship established with each sub-contractor. An alliance is defined as a formal and binding business relationship between the allied parties.

Table 3.1 Responsibility Table

Company Name	Responsibility Description	Alliance Relationship between Contractor and Sub-contractor(s)		
		Alliance Exists? (Y/N)	Date Established	Alliance Description
<b>Contractor</b>				
		Not Applicable	Not Applicable	Not Applicable
<b>Sub-contractor(s)</b>				

#### **SCHEDULE 4 – COMPANY’S BACKGROUND**

- 4.1 Each of the companies involved in this tender, including Contractor and sub-contractor(s) (if any), shall provide information on the company’s background, scope of operations, financial standing and certified copy of its Certificate of Incorporation or Certificate of Registration (as the case may be).

## SCHEDULE 5 – REFERENCES

- 5.1 Tenderers shall submit a list of customers in Table 5.1 to whom the Contractor has provided similar services as specified in this tender in the recent 5 years as of the Tender Closing Date.

Table 5.1 References of previous customers

Customer Name and Address	Customer Type (Govt or Quasi Govt)*	Contact Person	Title	Contact Number, Fax Number and E-mail Address

**\*Note:** Tenderers shall indicate whether the customer is a Government or Quasi Government organisation. A Quasi Government is defined as an organisation which (1) is managed and controlled by the Government; or (2) has at least 50% shares being held by the Government. Please leave the column blank if the customer is neither a Government or Quasi Government organisation.

- 5.2 The Ministry of Health shall treat all the information submitted under this schedule in strict confidence.
- 5.3 The Ministry of Health reserves the right to contact the references for tender assessment purposes.