

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/11/2023/UPP(TC)	DOMESTIC WASTE COLLECTION AND DISPOSAL SERVICE FOR WOMEN AND CHILDREN BLOCK OF RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL FOR A PERIOD OF THREE (3) YEARS	3 YEARS	RIPAS HOSPITAL	\$30.00	21 ST FEBRUARY 2023	<p>Abdul Aziz bin Hj Shamsuddin Head of Operational Section 4th Floor Women and Children Centre Raja Isteri Pengiran Anak Saleha (RIPAS) Hospital Negara Brunei Darussalam Contact No.: 2242424 EXT. 7420 e-mail: aziz.hjshamsuddin@moh.gov.bn</p>

SECTION 2

SPECIFICATIONS

TENDER REFERENCE NO: KK/11/2023/UPP(TC)

**INVITATION TO TENDER FOR
DOMESTIC WASTE COLLECTION AND DISPOSAL SERVICE FOR
WOMEN & CHILDREN BLOCK OF RAJA ISTERI PENGIRAN ANAK
SALEHA (RIPAS) HOSPITAL FOR A PERIOD OF THREE (3) YEARS**

GENERAL

1. Carry out Domestic Waste Collection and Disposal Services **daily** from the following premises: -

Management by RIPAS Hospital			
No	Location	Time Of Collection	No. of Days Per Week
1.1	Women & Children Block <ul style="list-style-type: none">• Basement 1	05.00am – 06.00am 03.00pm – 04.00 pm	7 days a week

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

2. The duration of the provision of Services is for **three (03)** years.
3. The proposed building modifications must be submitted to the Chief Executive Officer of the respective hospitals/facilities for permission before its implementation. And the Contractor shall finance towards the cost of supplying, installing, commissioning and maintenance of any related equipment/furniture/ including directional signage.

JOB SCOPE

4. Clean all waste receptacles (include the store, loading and unloading area), any excess refuse in and around the waste receptacles as follows: -

Location	Monthly	Daily	Weekly
<ul style="list-style-type: none"> • General Waste Store • Rubbish Truck Parking • Dirty Unloading Area 	<ul style="list-style-type: none"> • Spray High Pressure Water Jet • Scrubbing • Sweeping • High Dusting 	<ul style="list-style-type: none"> • Disinfected Floor Area • Sweeping • Spot Clean • Wash & Clean rubbish bins after each used 	<ul style="list-style-type: none"> • Clean Container every weekend

5. Leave all waste receptacles clean and tidy to the satisfaction of the officer-in-charge of each of the Collection Points.
6. Clean all waste spillage arising or occurring during **collection** or **transportation** immediately.
7. Ensure that the Collection Points and the designated route are free from waste spillage.
8. **Weight (Kg)** and record the General waste at the collection point before collected and transport out of Raja Isteri Pengiran Anak Saleha Hospital Area.
9. **Collect** the waste from the **Collection Points** and **transport** it to the **Municipal Dumping Ground** located at **Sungai Paku** for disposal or any designated approved government dumping ground within the state of Negara Brunei Darussalam.
10. The Contractor should install odor control unit in the General Waste Area, Rubbish Truck Parking and Dirty Unloading Area to absorb and bio-degrade odorous compounds in the air.

DESIGNATED ROUTE

11. **Use the designated route** as described by the Management of R.I.P.A.S Hospital for waste collection from/to stated Collection Points in **Appendix A**.

VEHICLES

12. Collect and transport the Waste from the Collection Points using **vehicles specially designated for such purposes**. Such vehicles shall be thoroughly cleaned after each cycle of use when spillage has occurred.

13. The vehicles used must be in good condition and clean in operation in order to prevent any delayed.
14. Submit **the list of vehicles proposed** for use in the performance of this Agreement **within (10) days of signing the Agreement** to the Hospital Administrator stating: -
 - i. the registration numbers
 - ii. load carrying capacities by weight and volume

Any subsequent changes to the list **shall be notified to the** Hospital Administrator in advance.

Substitute vehicles to be used in case of breakdown shall also be made known to the Ministry of Health in advance.

15. Ensure that drivers of all such vehicles and any assistants to such drivers are properly trained to carry out their duties in a safe and professional manner and be able to manage any possible emergency situation.
16. Provide such drivers and assistants with protective clothing appropriate for the tasks assigned to them.

EQUIPMENT

17. Supply and maintain waste receptacles at the Main Collection Points as follows: -

Four (4) unit bins with wheels roll-top lid – 1100 liter

Capacity	: 1100 liter
Specification	<p>Lid : Two handles for easy opening : Pedal for easy opening of the bin</p> <p>Bins : Heavy duty, puncture proof, leak proof and top lid</p> <p>Wheels : Heavy duty, independent, auto-dirigible with metal rim and solid rubber casing for silent rolling of the bin : Bear simple foot brake on the two front wheels for easy immobilization of the bin : Rotation locking system of the two rear wheels (route guides) for direction control and for easy handling of the bin during the transfer</p>

One (1) unit Heavy-duty Weighing Scale

Capacity	: 100 – 150 kg
Specification	Weighing Scale : Heavy duty, range of measurement (approx. ± 0.01 kg) : To measure all the general waste collected at the collection point and the data to be submitted to Hospital Administration representative monthly.

TRANSPORTATION

4. Refuse Compactor Truck are required to collect domestic waste at the set location in 1.1
5. The **Maximum height** of the Refuse Compactor Truck **should not exceed 3 mtr.**
6. Any spillage or rubbish fall behind during collection and transportation within the Hospital compound must immediately clean and recollected.

CLEANING SCHEDULE

7. Every location of disposal should be clean according to cleaning schedule specified in Form B

QUALITY SERVICES

8. Ensures that the Services provided under the Agreement are of high quality and conform to the Specifications outlined in Section 2 of the Invitation to Tender.
9. Institute strict procedures for the prevention of cross-infection.

PEST CONTROL

10. The Contractor should provide means of Pest Control at Collection Point (include the store, loading and unloading area). Pest refers from rodent to insects.

PERSONNEL

11. The Contractor shall provide and employ an adequate number of Employees as follows:

EMPLOYEES PER SHIFT	WORKING HOURS
1	08.00am – 08.00pm 08.00pm – 08.00am

18. The Hospital reserves the right to amend the working hours without prior notice to the Contractor.

12. The Contractor shall ensure that his personnel are present at their designated work areas during such working hours or as needed by the Hospital Administrator

13. Immediate steps shall be taken by the Contractor to provide temporary replacement/relief to make up the personnel required to provide the Services to the satisfaction of the Hospital.

14. A list of workers shall be submitted to the Hospital Administrator for monitoring and security purposes.

15. The Hospital Administrator reserves the right to remove or replace any of workers employed by the Contractor from the Hospital premises, who in the opinion of the Hospital Administrator has misbehaved or is incompetent or negligent in the performance of his/her duties.

16. The Contractor is responsible for the wages, insurance (workmen compensation and medical insurance), medical and welfare of his workers in accordance with the requirements of the Labour Department, Brunei Darussalam.

17. The Contractor shall take out, at its own expense, with an insurance approved in writing by the Hospital Administrator a policy or policies each specifically endorsed to provide indemnity to the Contractor and to the Hospital against any liabilities arising out of claims by personnel for payment of compensation under the Workmen’s Compensation Act (Cap 74 of the Laws of Brunei).

18. The Contractor undertakes to the Hospital Administrator that he will not employ, and will ensure that all of its sub-contractors will not employ, any illegal foreign workers.

19. The Contractor will ensure that his workers possess the necessary employment passes if they are employed outside Brunei Darussalam.

SECURITY PASSES AND UNIFORM

20. The contractor shall at its own expense, issue security passes to the cleaner's employees. For admission into the site, such passes must be worn by the cleaner's employees in the conspicuous manner so as to be easily identified by the Hospital's security personnel. Such passes must be worn in such manner all times while performing the services on site. Any lost or damaged passes must be reported immediately to the Hospital Administrator and upon approval from the Hospital Administrator, replace such lost/stolen pass at the cleaner's own costs.
21. The cleaner shall ensure that all its employees are properly attired in clean and neat uniforms and apparel which shall be provided by the cleaner at its own cost. Such uniforms must be pre-approved by the Hospital Administrator.

SECURITY ARRANGEMENT

22. The Contractor's personnel shall immediately leave the Hospital premises if requested by the Hospital or any of its staff.
23. The Contractor is required to establish a Security Plan to demonstrate the method of staff registration and tracking with valid permits. The Contractor must ensure that such records are maintained daily.
24. The Contractor shall ensure that his personnel do not, at any time, enter into areas which are not part of the Hospital premises except as directed by the Hospital.
25. For security purposes, the Contractor will provide the Hospital Administrator with the following particulars of his workers at least one (1) month before the commencement of the Services:
 - Name
 - Address
 - Identity Card Number / Passport Number
 - Gender
 - Citizenship
 - Expiry date of work pass (for foreign workers)

COMMUNICATIONS

26. The Contractor shall ensure that the personnel are equipped with appropriate telecommunication devices (e.g. walkie-talkie, wireless phone) so that they are easily contacted to each other, Contract Manager and by the Assistant Domestic.

NOTIFICATION

27. Ensure that any matters concerned the above services are to be **communicated directly** to the relevant Management (Management of RIPAS Hospital depending on the affected locations including pricing, claims/payment and collection schedule.
28. The Contractor shall **notify** the Hospital Administrator **within 24 hours of any disruption in the schedule of collection.**
29. The Contractor shall **inform** the Hospital Administrator **within 24 hours of finding any clinical waste or bio-hazardous waste** (normally contained in yellow plastic bags or containers labeled bio-hazardous) in any of the Collection Points.

STANDARD OF PROCEDURE (SOP)

30. Hand Washing
 - Hands washing can minimize micro-organisms on the hands when there is contact with blood, body fluids, secretions and excretions
 - Personnel should wash their hands using soap and water:
 - After handling, collection and transporting domestic waste
 - Immediately after removing gloves
31. Use of Personal Protective Equipment (PPE)
 - The use of PPE provides a physical barrier between the microorganism and the personnel/user
 - PPE prevents the eyes, hands, clothing and shoes from contaminations of microorganism as well contact of blood or body fluid that may contain infectious agents
 - PPE includes:
 - Thick long gloves (rubber) – should be of sufficient thickness to minimize sharp injuries
 - Mask
 - Protective eye wear
 - Plastic apron – must be of single use and fluid repellent
 - Boots (rubber)

32. Collecting, Handling and Transporting

- All personnel should wear PPE when collecting and transporting domestic waste
- All personnel need to be aware they are at risk from sharps and other instruments
- Wheeled trolleys should not have any sharp edges that could damage waste bags during loading and unloading
- Trolleys should be covered during transport from the storage area to the municipal dumping area
- Trolleys should be cleaned and disinfected daily with appropriate disinfectant (chlorine releasing agent – Clorox 1:10)

33. Prevention from sharps injuries

- Personnel must use thick gloves (rubber) for the task of handling all domestic waste
- Personnel must use suitable tools e.g. tongs to pick up needles or visible sharp objects

34. Management of needle stick injury

- Immediately stop what you are doing and attend the injury
- Encourage bleeding by squeezing
- Do not suck
- Wash well under running water
- Dry and apply water proof dressing
- Inform supervisor
- Contact infection control nurse
- Fill in 'the notification incident form'
- Tetanus toxoid (to be given at A&E Department)
- Refer to Occupational Health Division

Note: if accident happens after office hours, attend the Accident & Emergency Department for management and see infection control nurse the following day.

35. Environmental Cleaning

- Cleaning shall be done daily with soap and water
- Pour prepared solution of Clorox 1:10 dilution (1 part of Clorox to 9 parts of water mixture) onto spill e.g. blood & body fluids and leave for 5 minutes)
- Wash hands with soap and water after removing glove

AUTHORISED REPRESENTATIVE

36. For the purpose of the provision of Services, the Hospital will be represented by the Housekeeping Manager, who will be the authorized Hospital representative.

37. All communication and notices shall be directed to the attention of:

**Head of Operation
Raja Isteri Pengiran Anak Saleha Hospital,
Bandar Seri Begawan BA1710
Negara Brunei Darussalam
Tel: 2242424 Ext 7428
Fax: 2242690 (CEO Office)**

CLAIMS

38. The Contractor shall submit the invoice of the previous month on the first week of each month. All claims shall be addressed to:

**The Permanent Secretary Ministry of Health
(Attention: Chief Executive Officer RIPAS Hospital)
Bandar Seri Begawan**

39. All relevant supporting documents (checklist Form A, B, C, D and E) **shall be attached together when submitting the claims.** Refer to **Appendix B.**

40. Written warnings will be sent to the cleaning contractor if the quality of work is proven to be unsatisfactory. The Hospital is entitled to make deductions, following advice from the Ministry of Health, with regards to the amount payable to the contractor.

41. Deduction of payment will continue and will be adjusted accordingly based on performance in the quality of work **acceptable** by the Hospital Administrator.

RIGHT TO APPOINT OTHER VENDORS

42. The Hospital reserves the right to engage other vendors to provide the services if the Contractor fails to perform in full compliance with the contract.

43. All expenses incurred shall be recoverable in full from the Contractor by the Hospital.

SCHEDULE 1 – TENDER FORM

TENDER FORM

TENDER REFERENCE NO: KK/11/2023/UPP(TC)

INVITATION TO TENDER FOR DOMESTIC WASTE COLLECTION AND DISPOSAL SERVICE FOR WOMEN AND CHILDREN BLOCK OF RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL FOR A PERIOD OF THREE (3) YEARS

TENDER OF (name of tenderer) _____

Company/Business Registration No. _____

Tender Closing Date : _____

ITEM	DESCRIPTION	AMOUNT								
1	MANAGEMENT BY RIPAS HOSPITAL									
	<table border="1"><thead><tr><th>No</th><th>Location</th><th>Time Of Collection</th><th>No. of Days Per Week</th></tr></thead><tbody><tr><td>1.1</td><td>Women & Children Block • Basement 1</td><td>05.00am – 06.00am 03.00pm – 04.00 pm</td><td>7 days a week</td></tr></tbody></table>	No	Location	Time Of Collection	No. of Days Per Week	1.1	Women & Children Block • Basement 1	05.00am – 06.00am 03.00pm – 04.00 pm	7 days a week	
	No	Location	Time Of Collection	No. of Days Per Week						
	1.1	Women & Children Block • Basement 1	05.00am – 06.00am 03.00pm – 04.00 pm	7 days a week						
<table border="1"><thead><tr><th>EMPLOYEES PER SHIFT (Station at RIPASH)</th><th>WORKING HOURS</th></tr></thead><tbody><tr><td>1</td><td>08.00am – 08.00pm 08.00pm – 08.00am</td></tr></tbody></table>	EMPLOYEES PER SHIFT (Station at RIPASH)	WORKING HOURS	1	08.00am – 08.00pm 08.00pm – 08.00am						
EMPLOYEES PER SHIFT (Station at RIPASH)	WORKING HOURS									
1	08.00am – 08.00pm 08.00pm – 08.00am									
2	Total Daily Contract Amount									
3	Total Annual Contract Amount (x 365)									
4	Total Overall Contract Amount for 3 years (x 3) (Carried to Tender Form)									

Note: The Contractor shall ensure that any matters concerned the above services are to be communicated directly to the relevant Management 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)** CALENDER 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 20 .

Tenderer's official stamp:

Signature of authorised officer of Tenderer

Name:

Designation :

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 Domestic 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
Contractor				
		Not Applicable	Not Applicable	Not Applicable
Sub-contractor(s)				

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.

SCHEDULE 6 – DECLARATION

6.1 Tenderers shall complete and submit the Declaration form below.

PENAKUAN PENENDER TENDERER'S DECLARATION

Rujukan Tawaran <i>Tender Reference</i>	
Tajuk Tawaran <i>Tender Title</i>	
Kementerian / Jabatan <i>Ministry / Department</i>	

Saya/Kami, (Isikan nama setiap pemilik syarikat/pemegang saham di bawah)
I/We (Fill in all the proprietor/shareholders' name below)

Bil. No.	Nama Name	Nombor Kad Pengenalan Brunei / Passpot Antarabangsa <i>Brunei Identity Card / International Passport Number</i>	Warna Colour	Tandatangan Signature
1				
2				
3				
4				
5				

Beralamat / *Address*

membuat **PENAKUAN** seperti berikut / *make the following DECLARATION:*

1. Saya / Kami yang bernama di atas,
I/We as the name stated above,
¹adalah pemilik berdaftar sebuah Firma yang bernama
A registered proprietor of

(Isikan nama firma / *fill in the firm's name*)

dengan alamat perniagaan di,
with its place of business at

(atau / or)

ⁱⁱadalah pemegang saham dalam sebuah Syarikat yang bernama
A shareholder in a Company,

Dengan alamat berdaftar di / *having its registered address at*

Yang telah menghadapkan Tawaran untuk projek yang disebutkan di atas;
Which has submitted a Tender Proposal in the above mentioned project;

2. ⁱⁱⁱSaya / Kami **tidak memiliki Firma (Firma-Firma) / Syarikat (Syarikat-Syarikat lain;** (sila lihat nota 3 dan 4 di bawah dan potong jika tidak berkenaan).
I/We do not own any other firm(s) / Company(ies); (see notes 3 and 4 below and delete where appropriate).
3. ^{iv}Saya/Kami adalah juga **pemilik / pemegang saham** dalam senarai **Firma (Firma-Firma) / Syarikat (Syarikat-Syarikat)** yang dinyatakan dalam Lampiran I
I/We also the proprietor / shareholder in the list of firm(s) / Company(ies) described at Annex I.

DAN saya/ kami selanjutnya membuat **PENGAKUAN** bahawa sepanjang pengetahuan saya/kami, Firma (Firma-Firma)/Syarikat (Syarikat-Syarikat) saya/kami yang dinyatakan dalam Lampiran 1 ini, tidak mengemukakan Tawaran untuk projek yang disebutkan di atas.
*AND I/We further **DECLARE** that to the best of my/our knowledge, none of my./our other firm(s)/Company(ies) set out in Annex 1, have submitted a Tender Proposal for this project.*

4. Saya/Kami juga membuat **PENGAKUAN** selanjutnya :
*I/We also hereby **DECLARE**:*
 - a. Bahawa sepanjang pengetahuan saya/kami, isteri/suami saya/kami atau Firma (Firma-Firma) Syarikat-Syarikat) kepunyaan isteri/suami saya/kami, tidak menghadapkan Tawaran untuk projek yang disebutkan di atas;
that to the best of my/our knowledge, neither my/our spouse or his/her firm(s)/Company(ies) have submitted a Tender Proposal for the above mentioned project; and
 - b. Bahawa saya/kami tidak berpakat sulit dengan Firma (Firma-Firma) / Syarikat (Syarikat-Syarikat) atau dengan sesiapa dalam menghadapkan Tawaran untuk projek yang disebutkan di atas;
that I/We have not colluded with any other firm(s)/Company(ies) or any other person or entity in submitting the Tender Proposal for the above mentioned project.
5. Saya/kami menyedari sepenuhnya, jika saya/kami memberi maklumat yang palsu bagi pengakuan ini, kami akan melakukan kesalahan yang boleh didakwa dibawah Kanun Hukuman Jenayah Bab 182 yang disertakan di LAMPIRAN I.
I/We fully aware that if I/We gave any information which is false, I/We committing an offence for which I/We liable to prosecution under the Penal Code. I/We also aware of Section 182 of the Penal Code reproduced below in Annex 1.

6. Saya/Kami juga difahamkan bahawa Firma/Syarikat saya/kami tidak akan dipertimbangkan bagi mengikuti Tawaran projek ini sekiranya sebarang maklumat dalam pengakuan ini tidak benar.

I/We also understand that my/our firm/Company will be disqualified for this tender in the event any information given herein is found to be false.

7. Saya/Kami memberi kuasa kepada _____ untuk menandatangani surat pengakuan ini sebagai pihak saya/kami sendiri dan sebagai wakil saya/kami untuk mengikatkan saya/kami dan Penender kepada perkara-perkara yang dinyatakan dalam Surat Pengakuan ini.

I/We hereby authorize _____ to sign this Tenderer's Declaration on my/our behalf and also on behalf of the Tenderer to bind ourselves and the Tenderer to the matters set out in this declaration.

Pada hari ini _____ haribulan _____, 20 .

Dated this day _____ of _____, 20

(Nama dan Tandatangan)

(Name and Signature)

^v(Pemilik Syarikat / CEO / Pengarah)

(The Owner of Co / CEO / Director)

(Cop Syarikat)

(Company Stamp)

ⁱMasukkan di sini jika orang yang membuat pengakuan adalah milik atau adalah seorang pemilik berdaftar Syarikat atau Nama Perniagaan.

Fill in here if an Owner of a Business Name

ⁱⁱMasukkan di sini jika orang yang membuat pengakuan adalah pemegang saham dalam sebuah Syarikat (Sdn. Bhd)

Fill in here if a shareholder in a Company (Sdn. Bhd)

ⁱⁱⁱPotong perenggan 3 jika orang yang membuat pengakuan TIDAK memiliki Firma-Firma / Syarikat-Syarikat lain.

If you DO NOT own other firms/Companies, please delete paragraph 3.

^{iv}Potong perenggan 2 jika orang yang membuat pengakuan adalah pemilik atau pemegang saham dalam Firma-Firma / Syarikat-Syarikat lain.

If you the Owner or Shareholder of other firms/Companies, please delete paragraph 2.

^vHendaklah ditandatangani oleh Pemilik Syarikat atau Ketua Pegawai Eksekutif atau Pengarah.

Must be signed by the Owner of Co or CEO or Director.

*Pengakuan Penender
Tenderer's Declaration*

LAMPIRAN 1
ANNEX 1

Mengikut perenggan 3 dalam pengakuan di atas, saya/kami menghadapkan senarai Firma (Firma-Firma) yang saya/kami menjadi pemiliknya seperti berikut:

Pursuant to paragraph 3 of the above declaration, I/We submit the following list of Firm(s) which I/We the proprietor of:

No	Nama / Name	Firma / Firm
1		
2		
3		
4		
5		
6		
7		
8		

Mengikut perenggan 3 dalam pengakuan di atas, saya/kami menghadapkan senarai Syarikat (Syarikat-Syarikat Sendirian Berhad) yang saya/kami menjadi pemiliknya seperti berikut :

Pursuant to paragraph 3 of the above declaration, I/We submit the following list of Company(ies) which I/We a shareholder of :

No	Nama / Name	Syarikat / Company
1		
2		
3		
4		
5		
6		
7		
8		

Bab 182 Kanun Hukuman Jenayah (Penggalt 22 Undang-Undang Negara Brunei Darussalam)
Sections 182 of the Penal Code (Cap 22 of the Laws of Brunei)

182. Barang siapa memberi kepada seseorang pegawai awam apa-apa maklumat yang diketahui atau dipercayai sebagai palsu, dengan maksud menyebabkan, atau dengan mengetahui bahawa kemungkinan akan menyebabkan pegawai awam tersebut :-

Whoever gives to any public servant any information which he knows or believes to be false, intending thereby to cause, or knowing it likely that he will thereby cause, such public servant ;-

(a) Melakukan atau meninggalkan apa-apa perkara yang pegawai awam itu seharusnya tidak melakukan atau tidak meninggalkan sekiranya keadaan yang sebenar, berkenaan dengan hal yang dimaklumkan itu, telah diketahui; atau

To do or omit anything which such public servant ought not do or omit if the true state of facts respecting which such information is given were known by him; or

(b) Menggunakan kuasanya yang sah disisi undang-undang yang mendatangkan kecederaan atau gangguan kepada seseorang.

To use the lawful power of such public officer to the injury or annoyance of any person.

Akan menerima hukuman penjara sehingga 6 bulan atau didenda sebanyak \$4,000.00 atau dengan kedua-duanya.

Shall be punished with imprisonment of either description for a term which may extend to 6 months, or with fine which may extend to \$4,000.00 or with both.

LISTS OF COMPANY OWNERSHIP

NO.	COMPANY NAME	OWNERSHIP	I.C NO. & ADDRESS