

BIL.	Quotation Reference	Description	Advertisement Date	Closing Date (Not Later Than 02.00PM)	Quotation Fee	Requesting Department	Focal Person
1	(31) IKLAN-QTN/UPP.HRIPAS/2024/OCCUPATIONAL	<p>SUPPLY AND DELIVERY ONE (1) UNIT OF STATIC BICYCLE FOR OCCUPATIONAL THERAPHY UNIT AT RAJA ISTERI PENGIRAN ANAK SALEHA HOSPITAL</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>	24/06/2024	06/07/2024	\$5.00	HOSPITAL RAJA ISTERI PENGIRAN ANAK SALEHA. KESIHATAN.	<p>DAYANG MUNIRAH' ATIRAH BINTI HAJI SAHIDI</p> <p>JURUPULIH CARA KERJA KANAN</p> <p>TEL: 2242424 ext. 5731</p>

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

QUOTATION/TENDER REFERENCE NO:	(31)IKLAN-QTN/UPP.HRIPAS/2024/OCCUPATIONAL
QUOTATION/TENDER NAME	SUPPLY AND DELIVERY ONE (1) UNIT OF STATIC BICYCLE) FOR OCCUPATIONAL THERAPHY UNIT AT RAJA ISTERI PENGIRAN ANAK SALEHA HOSPITAL.

NO	USER'S REQUIREMENTS			VENDOR'S OFFER					
	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY USAGE	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKING SIZE	TOTAL QUANTITY OFFERED	COST PER UNIT (B\$)	TOTAL COSTS (B\$)
1	STATIC BICYCLE: - REFER THE SPECIFICATION AS PER ATTACHED	PER UNIT	1						
								TOTAL PRICE (B\$)	

NO	<u>TERMS AND CONDITIONS</u>	VENDOR'S OFFER (PLEASE STATE)
1	Tenderer must be registered with the Ministry of Health.	
2	QUOTATION/TENDER FORM should be filled completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form <u>MAY</u> cause DISQUALIFICATION OF QUOTATION/TENDER.	
3	Each tenderer is allowed to quote ONE BRAND WITH ONE PRICE ONLY for each item. Submission of more than one brand and price will cause DISQUALIFICATION OF QUOTATION/TENDER.	
4	Brochures / catalogues should be submitted / attached with quotation/tender document.	
5	Samples should be submitted together with quotation/ tender or within fourteen (14 days) of the quotation/tender closing date (if applicable).	
6	DELIVERY PERIOD: (Please state) Not later than 4 weeks	(Yes / No) (If No, please specify)
7	PRICE VALIDITY: The quotation shall remain valid for 12 MONTHS 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).	

Section/Unit		Section/Unit Ref No.:	-
Person to Contact	Name :	Tel.No. :	
	E-mail : -	Fax No.:	-

FOR QUOTATION ONLY

TERMS AND CONDITIONS		
a.	Tenderer must be registered with the Ministry of Health	<p>Company's Official Stamp</p>
b.	Please fill in the QUOTATION FORM completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form MAY cause DISQUALIFICATION OF QUOTATION	
c.	Each tenderer is allowed to quote ONE BRAND WITH ONE PRICE ONLY for each item. Submission of more than one brand and price will cause DISQUALIFICATION OF QUOTATION	
d.	Please do not use TIPPEX for amendment	
		<p><i>Acknowledgement:</i></p> <p><i>Company Ref. No.:</i></p> <p>I hereby certify the above quote to be correct.</p> <p>Signature:</p> <p>.....</p> <p>Name:</p> <p>.....</p> <p>Designation:</p> <p>.....</p> <p>Date:</p> <p>.....</p>

TO PURCHASE STATIC BICYCLE FOR OCCUPATIONAL THERAPY UNIT, RIPAS HOSPITAL

SECTION I – USER REQUIREMENTS				
REF	DESCRIPTION	Tick (✓)		STATE OR SPECIFY
		YES	NO	REMARKS/ BROCHURE PAGE
1	ONE (1) UNIT OF STATIC BICYCLE			
2	USER TRAINING			
3	WARRANTY			
1	ONE (1) UNIT OF STATIC BICYCLE			
1.1	Adjustable workload with a range within 10 to 999 watt			
1.2	Touchscreen control unit			
1.3	Various test mode includes but not limited to hyperbolic mode, fixed torque mode and linear mode			
1.4	Ultralow step through for easy access			
1.5	Programmable control unit for custom protocols			
1.6	Has predefined protocol for basic/standard program.			
1.7	Inclusive of SpO2 sensor			
1.8	Inclusive of heart rate sensor (preferably via Bluetooth connection)			
2	USER TRAINING			STATE OR SPECIFY
2.1	Conduct user training to the all-end users by an application specialist or competent local engineer including but not limited to: <ul style="list-style-type: none"> • Basic user operation, user troubleshooting and user maintenance • CPACS and/or RPACS guide through (if necessary) • Operating manual (Hardcopy and/or Softcopy) 			
3	WARRANTY			
3.1	Tenderer to include warranty period of at least two (2) years (TENDERER TO INCLUDE A WARRANTY UNDERTAKING LETTER – SEE WARRANTY)			

* In your quotation/tender document, please breakdown/itemized the price for each accessories/ consumables

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SECTION II - PROCUREMENT (TO FILL IN)	
BRAND:	
MODEL:	
COUNTRY OF ORIGIN:	
UNIT PRICE (B\$):	
TOTAL PRICE (B\$):	
WHERE MARKETED:	
YEAR MANUFACTURED:	
WARRANTY:	<p>Tenderers to INCLUDE a Warranty Undertaking Letter stating the terms of warranty provided for the equipment in the tender. This includes but not limited to:</p> <ul style="list-style-type: none"> • Duration of warranty, • Warranty coverage • Excluded from Warranty • Warranty Planned Preventive Maintenance (See below) • Scope of Planned Preventive Maintenance <p>Tenderer to include a two-time planned preventive maintenance during the equipment warranty (one of which includes, if necessary, a PM Kit), on the sixth month after the date of commissioning and end of warranty period.</p>
WARRANTY PERIOD:	
DELIVERY TIME:	
PRICE VALIDITY:	

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SECTION III - TECHNICAL SPECIFICATION (TO FILL IN)			
MAINS POWER SUPPLY:			
EQUIPMENT AMBIENT OPERATING TEMPERATURE RANGE:			
BATTERY BACKUP:			
INTERNATIONAL SAFETY STANDARD:			
TECHNICAL SUPPORT:		NO OF LOCAL ENGINEER/TECHNICIAN:	
		NEAREST OVERSEA SUPPORT:	
DIMENSIONS:			MM / CM / INCH
WEIGHT:			KG / G / LBS
EQUIPMENT WHOLE LIFE TIME SUPPORT:		Number of years, spare parts are available after the installation of the equipment: _____ years	
		YES	NO
BROCHURE:	Submission of detailed brochure		
USER AND SERVICE MANUALS:	Tenderers to acknowledge that they must submit at least TWO sets of USER AND SERVICE manuals when applying commissioning form. One Set for End User, One Set for BME. (Please provide hardcopy or softcopy)		

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<p>USER TRAINING</p>	<p>Tenderers to conduct training to users. Tenderer must prepare a training attendance or proof of training done to end user during commissioning and the refresher course (6) months after commissioning.</p> <p>Training must include but not limited to:</p> <ul style="list-style-type: none"> • Operation • Basic troubleshooting • User maintenance 		
<p>TECHNICAL TRAINING</p>	<p>Tenderers to conduct training to Biomedical Engineers and Technicians.</p> <p>Training must include but not limited to:</p> <ul style="list-style-type: none"> • Troubleshooting and basic corrective maintenance 		
<p>ON-SITE:</p>	<ul style="list-style-type: none"> • Training to be conducted locally, tenderers are required to: <ul style="list-style-type: none"> • Provide training materials, test equipment, demo equipment, etc. • Provide training to two groups of technical staffs. • Provide 2 days (minimum) of training for each group. • Training to be conducted at the equipment site. 		