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/144/2024/UPP	144/2024/UPP SUPPLY AND DELIVERY OF MEDICAL ITEM (ISTENT INJECT W T 360 μM TRAECULAR - MICRO-BY PASS SYSTEM) FOR EYE CENTRE, RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL		RIPAS HOSPITAL	\$30.00	23 RD JULY 2024	Dr Hjh Helena binti POKSJ DP haji Hurairah Deputy Head of Ophthalmology Raja Isteri Pengiran Anak Saleha Hospital Ministry of Health Negara Brunei Darussalam Contact No: 2242424 ext 6329 email: helena.hurairah@moh.gov.bn

NOMBOR TAWARAN : KK/144/2024/UPP

KEMENTERIAN KESIHATAN NEGARA BRUNEI DARUSSALAM

SUPPLY AND DELIVERY OF MEDICAL ITEM (ISTENT INJECT W T 360 µM TRAECULAR - MICRO-BY PASS SYSTEM) FOR EYE CENTRE, RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL

YURAN TAWARAN: \$30.00

NOMBOR RESIT :

TARIKH TUTUP : HARI SELASA, 23HB JULAI 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 AND REQUIREMENTS

TENDER REFERENCE NO: KK/144/2024/UPP

INVITATION TO TENDER

SUPPLY AND DELIVERY OF MEDICAL ITEM (ISTENT INJECT W T 360 µm TRAECULAR MICRO-BY PASS SYSTEM) FOR EYE CENTRE, RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL

NOT LATER THAN 4 – 8 WEEKS

NO.	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY REQUESTED
1	ISTENT INJECT W T 360 µm TRAECULAR MICRO-BY PASS SYSTEM – PACK SIZE: BOX OF 2 PRELOAD ISTENT	вох	30 BOXES

NO.	TERMS AND CONDITIONS					
1	Tenderer must be registered with the Ministry of Health.					
2	TENDER FORM should be filled completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form <u>MAY</u> cause DISQUALIFICATION OF 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 TENDER .					
4	All consumables supplied throughout this tender <u>shall</u> have a minimum expiry date of twelve (12) months / on delivery. Should the consumables be urgently needed, provision of consumables with expiry date of less than twelve (12) months should be first agreed by the User before delivery is made.					
5	Brochures / catalogues should be submitted / attached with tender document.					
6	Samples should be submitted together with tender or within fourteen (14 days) of the tender closing date (if applicable).					
7	DELIVERY PERIOD: Not later than 4 – 8 weeks					
8	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	EYE CE HOSPIT	NTER, RAJA ISTERI PENGIRAN ANAK SALEHA AL	Section/Unit Ref No.:	
Person to Contact	Name:	MISS HELENA PEHIN ORANG KAYA SETIA JAYA DATO PADUKA HAJI HURAIRAH DEPUTY HEAD EYE CENTER, RAJA ISTERI PENGIRAN ANAK SALEHA HOSPITAL	Tel. No. :	2242424 EXT. 6329
	E-mail:	helena.hurairah@moh.gov.bn	Fax No.:	

SECTION 3

TENDER FORM

TENDER REFERENCE NO: KK/144/2024/UPP

INVITATION TO TENDER SUPPLY AND DELIVERY OF MEDICAL ITEM (ISTENT INJECT W T 360 µm TRAECULAR MICRO-BY PASS SYSTEM) FOR EYE CENTRE, RAJA ISTERI PENGIRAN ANAK SALEHA (RIPAS) HOSPITAL

TENDER OF (name of tenderer) :______

Company/Business Registration No. : _____

Tender Closing Date :

DELIVERY PERIOD

	USER'S REQUIRE	VENDOR'S OFFER							
NO.	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY REQUESTED	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKING SIZE	TOTAL QUANTITY OFFERED	COST PER UNIT (B\$)	TOTAL COSTS (B\$)
1	ISTENT INJECT W T 360 µm TRAECULAR MICRO-BY PASS SYSTEM - PACK SIZE: BOX OF 2 PRELOAD ISTENT	вох	30 BOXES						
TOTAL PRICE (B\$)									

NO.	TERMS AND CONDITIONS	VENDOR'S OFFER (PLEASE STATE)
1	Tenderer must be registered with the Ministry of Health.	
2	TENDER FORM should be filled completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form MAY cause DISQUALIFICATION OF 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 TENDER .	
4	All consumables supplied throughout this tender <u>shall</u> have a minimum expiry date of twelve (12) months / on delivery . Should the consumables be urgently needed, provision of consumables with expiry date of less than twelve (12) months should be first agreed by the User before delivery is made.	
5	Brochures / catalogues should be submitted / attached with tender document.	
6	Samples should be submitted together with tender or within fourteen (14 days) of the tender closing date (if applicable).	
7	DELIVERY PERIOD: Not later than 4 - 8 weeks	(Yes / No) (If No, please specify)
8	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).	

- 1. We offer and undertake on your acceptance of our Tender to provide the abovementioned services in accordance with your Invitation To Tender.
- 2. Our Tender is fully consistent with and does no 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. OUR OFFER IS VALID FOR <u>TWELVE (12)</u> CALENDAR MONTHS FROM THE TENDER CLOSING DATE.
- 4. When requested by you, we shall extend the validity of this offer.
- 5. We further undertake to give you any further information which you may require.

Dated this_____day of_____, _____

Signature of authorised officer of Tenderer Name: Designation: Tenderer's official stamp