

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/146/2025/SSBH	SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONINIG LOW TEMPERATURE STERILIZER FOR CSSD, SURI SERI BEGAWAN (SSB) HOSPITAL		SURI SERI BEGAWAN KUALA BELAIT HOSPITAL	\$30.00	10 TH JUNE 2025	Muhd Amirul Fazleen bin Haji Khalidin Biomedical Engineer Suri Seri Begawan Hospital (SSBH) Ministry of Health Negara Brunei Darussalam Estet Management & Project Development Ministry of Health Negara Brunei Darussalam Contact No.: 3335331 ext. 4222

TENDER REFERENCE NO.:KK/146/2025/SSBH

**MINISTRY OF HEALTH
NEGARA BRUNEI DARUSSALAM**

**SUPPLY, DELIVERY, INSTALLATION, TESTING AND
COMMISSIONING LOW TEMPERATURE STERILIZER FOR
CSSD, SURI SERI BEGAWAN (SSB) HOSPITAL**

TENDER FEES : \$30.00

RECEIPT NO. :

CLOSING DATE : ON TUESDAY, 10TH June 2025

TIME : 2.00 PM

FOA :

**THE CHAIRMAN
MINI TENDER BOARD, TENDER BOX
GROUND FLOOR, MINISTRY OF HEALTH
COMMONWEALTH DRIVE
BANDAR SERI BEGAWAN BB3910
NEGARA BRUNEI DARUSSALAM**

(CLUSTERING)

SECTION 2

SPECIFICATIONS AND REQUIREMENTS

TENDER REFERENCE NO: KK/146/2025/SSBH

INVITATION TO TENDER
SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONING LOW TEMPERATURE
STERILIZER FOR CSSD, SURI SERI BEGAWAN (SSB) HOSPITAL

SECTION 1 – USER REQUIREMENTS	
REF. NO.	DESCRIPTION
1	ONE (1) UNIT OF LOW TEMPERATURE STERILIZER
2	STANDARD FEATURES
3	ADDITIONAL REQUIREMENTS
4	WARRANTY
5	END USER TRAINING
6	TECHNICAL TRAINING

REF. NO.	DESCRIPTION
1	ONE (1) UNIT OF LOW TEMPERATURE STERILIZER
1	One (1) unit of low temperature sterilizer that utilise hydrogen peroxide as the sterilant to sterilize medical instruments and devices especially for the heat- and moisture-sensitive at Central Sterile Supply Department (CSSD), Suri Seri Begawan (SSB) Hospital, Kuala Belait
2	STANDARD FEATURES
1	Large capacity and double door (pass-through) model
2	Sterilization method: Vaporized H ₂ O ₂ + Plasma
3	Minimum usable chamber volume must be 120 litres or better
4	Cycle time: preferable between 30 to 60 mins ± 5 mins
5	Touchscreen control interface panel
6	Comes with built-in printer
7	Inclusive of data logging capability via network or USB
8	Temperature range: Less than 60°C or better
9	Stainless steel chamber
10	Tray system: minimum two (2) adjustable or removable stainless-steel trays

REF. NO.	DESCRIPTION
11	Sterility assurance level (SAL) must meet 10 ⁻⁶
12	Validated by ISO 14937 and EN 556
13	Inclusive of a biological indicator incubator
14	Complete with the following accessories:
14.1	Thirty (30) cassettes of Sterilization agents or equivalent
14.2	Ten (10) rolls of printing paper
14.3	Two hundred (200) units of chemical indicator strip
14.4	Five (5) units of chemical indicator tape
14.5	Thirty (30) units of biological indicator
14.6	Three hundred (300) units of 760mm x 760mm non-woven pack or equivalent
14.7	One (1) roll of 250mm x 70mm pouch roll or equivalent
14.8	One (1) roll of 150mm x 70mm pouch roll or equivalent
14.9	Two (2) units of instrument trays
14.10	Two (2) units of endoscope instrument tray
14.11	Any other necessary standard accessories to maximise use of the low temperature sterilizer
14.12	Tenderer to provide a separate quote consisting of one unit/pack of each accessories and consumable above for any additional purchase in the near future with price validity of one (1) year after this tender closing date. Tenderer may also include pricing of other accessories or consumables not listed above.
3	ADDITIONAL REQUIREMENTS
1	Tenderer is required to do a site visit and attach a proposal layout plan to install the sterilizer at the location suggested by Hospital Management. (Tenderer consult and liaise with both BME and Estate Management Unit SSBH.)
2	Tenderer to also look into and include cost of relocating the existing Formalin Low Temperature Sterilizer at CSSD and relocate it to a location set by Hospital Management.
3	Tenderer to include ALL cost associated with the necessary installation materials including hacking, minor renovation, piping, electrical wiring and other related matter.
4	Tenderer to acknowledge and ensure gaps between machine and walls are seal with stainless steel panels or any suitable materials if necessary
5	Tenderer to rectify any minor defects cause during uninstalling and installing.
4	WARRANTY
1	Tenderer to include warranty period of at least two (2) years for both hardware and software

REF. NO.	DESCRIPTION
2	Tenderers to ACKNOWLEDGE the Warranty Undertaking Form in Section 4 stating the terms of warranty provided for the equipment in the tender for the period of two years. This includes but not limited to:
2.1	Scope of Warranty
2.2	One time Planned Preventive Maintenance per year during warranty in accordance to Manufacturer's Standard
2.3	Comprehensive Breakdown and Corrective maintenance repair during warranty
5	END USER TRAINING
1	Conduct user training to the all-end users by an application specialist or competent local engineer including but not limited to:
1.1	Basic user operation, user troubleshooting and user maintenance
1.1	Provide Operating manual (Hardcopy and/or Softcopy)
1.2	Tenderer must prepare a training attendance or proof of training done to end user during commissioning and the refresher course (6) months after commissioning.
6	TECHNICAL TRAINING
1	Introductory Technical Training to Biomedical Engineers and Technicians at BME Office by competent Tenderer's Engineer/Technicians that includes but not limited to: <ul style="list-style-type: none"> ▪ Troubleshooting and basic corrective maintenance ▪ Handling and basic inspection maintenance *(Two sessions/groups if required)

SECTION 2 - PRICE PROPOSAL	
UNIT PRICE: BND\$	TOTAL PRICE: BND\$

SECTION 3 - PROCUMENT AND TECHNICAL SPECIFICATION
BRAND:
COUNTRY OF ORIGIN:
WARRANTY PERIOD:
YEAR INTRODUCED TO MARKET:
PRICE VALIDITY: [AT LEAST ONE (1) YEAR PRICE VALIDTY]
AUTHORIZED DISTRIBUTOR: (AUTHORIZED DISTRIBUTOR LETTER ATTACHED)
DETAILED BROCHURE INCLUDED
USER AND SERVICE MANUALS:
MAINS POWER SUPPLY:
BATTERY:
POWER ADAPTER/CHARGER OUTPUT RATING:
EQUIPMENT AMBIENT OPERATING TEMPERATURE RANGE:
NUMBER OF TECHNICAL SUPPORT (ENGINEER/TECHNICIAN) Please provide training or certification for locals who is trained/certified
DIMENSIONS AND WEIGHT OF MAIN UNIT:
EQUIPMENT WHOLE LIFE TIME SUPPORT:

SECTION 4 – WARRANTY UNDERTAKING FORM

Tenderer, on behalf of the manufacturer, acknowledged and agrees that when equipment is under the warranty period, must cover the scope of normal warranty below at no additional cost:

NORMAL WARRANTY

- Warrants the supplied medical equipment and its accessories to be in good condition, in working order and free from defects to the extent such equipment do not comply with specifications, under normal use for the warranty period. The scope of warranty covers to its maximum extent permitted by applicable law.
- During warranty, tenderer must rectify issues arise from any mechanical, technical or software faulty as soon as it is reported.
- **Exchange warranty;** Providing replacement units or OEM parts:
 - A. Warranty against defects – Manufacturing defects or Equipment malfunction resulted from mechanical, electrical or software failure during Commissioning or within the first _____ months of use
 - B. Faulty workmanship or unsatisfactory condition during delivery or commissioning
 - C. If a unit or accessory is deemed used item or refurbished item (not a new unit) by the user and BME Unit.
- _____ **time Planned Preventive Maintenance (PPM) PER YEAR** according to Manufacturer's Preventive Maintenance Guideline including PM kits and any other relevant parts to prolong equipment lifespan.

EXCLUSION FROM WARRANTY

MOH understand that the following circumstances are not covered in the warranty and Tenderer may quote for repair and subject to MOH approval:

- Unauthorized modifications - an alteration or repair by anyone other than the Manufacturer or Authorized agent during warranty period.
- Accidental damage or problems caused by negligence or mishandling, subject to appropriate justification by both parties.
- Vandalism and Natural disasters
- Normal wear and tear

CONTENTS

SECTION 1 – USER REQUIREMENTS.....	Error! Bookmark not defined.
1. ONE (1) UNIT OF WASHER DISINFECTOR	Error! Bookmark not defined.
2. STANDARD FEATURES	Error! Bookmark not defined.
3. ADDITIONAL REQUIREMENTS	Error! Bookmark not defined.
4. WARRANTY.....	Error! Bookmark not defined.
5. END USER TRAINNING.....	Error! Bookmark not defined.
6. TECHNICAL TRAINNING	Error! Bookmark not defined.
SECTION 2 – PRICE PROPOSAL	5
SECTION 3 - PROCUMENT AND TECHNICAL SPECIFICATION.....	Error! Bookmark not defined.
SECTION 4 – WARRANTY UNDERTAKING FORM.....	Error! Bookmark not defined.

SECTION 3

TENDER FORM

To:

TENDER REFERENCE NO: KK/146/2025/SSBH

INVITATION TO TENDER
SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONING LOW TEMPERATURE
STERILIZER FOR CSSD, SURI SERI BEGAWAN (SSB) HOSPITAL

TENDER OF (*name of tenderer*) : _____

Company/Business Registration No. : _____

Tender Closing Date : _____

SECTION 1 – USER REQUIREMENTS				
REF. NO.	DESCRIPTION	Tick (✓)		STATE OR SPECIFY OR REMARKS OR BROCHURE PAGE
		YES	NO	
1	ONE (1) UNIT OF WASHER DISINFECTOR			
2	STANDARD FEATURES			
3	ADDITIONAL REQUIREMENTS			
4	WARRANTY			
5	END USER TRAINING			
6	TECHNICAL TRAINING			

REF. NO.	DESCRIPTION	Tick (✓)		STATE OR SPECIFY OR REMARKS OR BROCHURE PAGE
		Y	N	
1	ONE (1) UNIT OF LOW TEMPERATURE STERILIZER			
1	One (1) unit of low temperature sterilizer that utilise hydrogen peroxide as the sterilant to sterilize medical instruments and devices especially for the heat- and moisture-sensitive at Central Sterile Supply Department (CSSD), Suri Seri Begawan (SSB) Hospital, Kuala Belait			
2	STANDARD FEATURES			
1	Large capacity and double door (pass-through) model			
2	Sterilization method: Vaporized H ₂ O ₂ + Plasma			
3	Minimum usable chamber volume must be 120 litres or better			
4	Cycle time: preferable between 30 to 60 mins ± 5 mins			
5	Touchscreen control interface panel			
6	Comes with built-in printer			
7	Inclusive of data logging capability via network or USB			
8	Temperature range: Less than 60°C or better			
9	Stainless steel chamber			
10	Tray system: minimum two (2) adjustable or removable stainless-steel trays			
11	Sterility assurance level (SAL) must meet 10 ⁻⁶			
12	Validated by ISO 14937 and EN 556			
13	Inclusive of a biological indicator incubator			
14	Complete with the following accessories:			
14.1	Thirty (30) cassettes of Sterilization agents or equivalent			
14.2	Ten (10) rolls of printing paper			
14.3	Two hundred (200) units of chemical indicator strip			
14.4	Five (5) units of chemical indicator tape			
14.5	Thirty (30) units of biological indicator			
14.6	Three hundred (300) units of 760mm x 760mm non-woven pack or equivalent			
14.7	One (1) roll of 250mm x 70mm pouch roll or equivalent			

REF. NO.	DESCRIPTION	Tick (✓)		STATE OR SPECIFY OR REMARKS OR BROCHURE PAGE
		Y	N	
14.8	One (1) roll of 150mm x 70mm pouch roll or equivalent			
14.9	Two (2) units of instrument trays			
14.10	Two (2) units of endoscope instrument tray			
14.11	Any other necessary standard accessories to maximise use of the low temperature sterilizer			
14.12	Tenderer to provide a separate quote consisting of one unit/pack of each accessories and consumable above for any additional purchase in the near future with price validity of one (1) year after this tender closing date. Tenderer may also include pricing of other accessories or consumables not listed above.			
3	ADDITIONAL REQUIREMENTS			
1	Tenderer is required to do a site visit and attach a proposal layout plan to install the sterilizer at the location suggested by Hospital Management. (Tenderer consult and liaise with both BME and Estate Management Unit SSBH.)			
2	Tenderer to also look into and include cost of relocating the existing Formalin Low Temperature Sterilizer at CSSD and relocate it to a location set by Hospital Management.			
3	Tenderer to include ALL cost associated with the necessary installation materials including hacking, minor renovation, piping, electrical wiring and other related matter.			
4	Tenderer to acknowledge and ensure gaps between machine and walls are seal with stainless steel panels or any suitable materials if necessary			
5	Tenderer to rectify any minor defects cause during uninstalling and installing.			
4	WARRANTY			
1	Tenderer to include warranty period of at least two (2) years for both hardware and software			
2	Tenderers to ACKNOWLEDGE the Warranty Undertaking Form in Section 4 stating the terms of warranty provided for the equipment in the tender for the period of two years. This includes but not limited to:			
2.1	Scope of Warranty			
2.2	One time Planned Preventive Maintenance per year during warranty in accordance to Manufacturer's Standard			
2.3	Comprehensive Breakdown and Corrective maintenance repair during warranty			

REF. NO.	DESCRIPTION	Tick (✓)		STATE OR SPECIFY OR REMARKS OR BROCHURE PAGE
		Y	N	
5	END USER TRAINNING			
1	Conduct user training to the all-end users by an application specialist or competent local engineer including but not limited to:			
1.1	Basic user operation, user troubleshooting and user maintenance			
1.1	Provide Operating manual (Hardcopy and/or Softcopy)			
1.2	Tenderer must prepare a training attendance or proof of training done to end user during commissioning and the refresher course (6) months after commissioning.			
6	TECHNICAL TRAINNING			
1	Introductory Technical Training to Biomedical Engineers and Technicians at BME Office by competent Tenderer's Engineer/Technicians that includes but not limited to: <ul style="list-style-type: none"> ▪ Troubleshooting and basic corrective maintenance ▪ Handling and basic inspection maintenance *(Two sessions/groups if required)			

SECTION 2 - PRICE PROPOSAL	
UNIT PRICE: BND\$	TOTAL PRICE: BND\$

SECTION 3 - PROCUREMENT AND TECHNICAL SPECIFICATION						
BRAND:		MODEL:				
COUNTRY OF ORIGIN:		UNIT PRICE (B\$):				
WARRANTY PERIOD:		TOTAL PRICE (B\$):				
YEAR INTRODUCED TO MARKET:		LAST COUNTRY SOLD TO:				
PRICE VALIDITY: [AT LEAST ONE (1) YEAR PRICE VALIDITY]		DELIVERY TIME:				
AUTHORIZED DISTRIBUTOR: (AUTHORIZED DISTRIBUTOR LETTER ATTACHED)		APPOINTED BRUNEI DISTRIBUTOR				
		PROCURE FROM OVERSEA AUTHORIZED DISTRIBUTOR	COMPANY NAME:			
			COMPANY ORIGIN:			
DETAILED BROCHURE INCLUDED		YES		NO	<input checked="" type="checkbox"/> or specify where appropriate	
USER AND SERVICE MANUALS:		YES		NO	Tenderers to acknowledge that they must provide 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)	
MAINS POWER SUPPLY:		220V-240V		OTHERS:		
		50-60HZ		OTHERS:		
BATTERY:		RECHARGEABLE		SINGLE-USE		REPLACEABLE
		OTHERS:				
	TYPE OF BATTERY:					
	RATING:					
POWER ADAPTER/CHARGER OUTPUT RATING:						
EQUIPMENT AMBIENT OPERATING TEMPERATURE RANGE:						
NUMBER OF TECHNICAL SUPPORT (ENGINEER/TECHNICIAN) Please provide training or certification for locals who is trained/certified	LOCAL			Trained / Certified Not yet trained on the product		
	OVERSEA (SPECIFY LOCATION)		NEAREST LOCATION:			
DIMENSIONS AND WEIGHT OF MAIN UNIT:		<input type="checkbox"/> mm <input type="checkbox"/> cm <input type="checkbox"/> inch			<input type="checkbox"/> Kilogram (Kg) <input type="checkbox"/> Gram(g) <input type="checkbox"/> Pound (lbs)	
EQUIPMENT WHOLE LIFE TIME SUPPORT:	The supplier shall ensure that spare parts for the equipment are available for a minimum of 8 years after installation, with the support period extending beyond the expected lifecycle of the equipment. No. of years: _____ (Please specify)					

SECTION 4 – WARRANTY UNDERTAKING FORM

Tenderer, on behalf of the manufacturer, acknowledged and agrees that when equipment is under the warranty period, must cover the scope of normal warranty below at no additional cost:

NORMAL WARRANTY

- Warrants the supplied medical equipment and its accessories to be in good condition, in working order and free from defects to the extent such equipment do not comply with specifications, under normal use for the warranty period. The scope of warranty covers to its maximum extent permitted by applicable law.
- During warranty, tenderer must rectify issues arise from any mechanical, technical or software faulty as soon as it is reported.
- **Exchange warranty;** Providing replacement units or OEM parts:
 - A. Warranty against defects – Manufacturing defects or Equipment malfunction resulted from mechanical, electrical or software failure during Commissioning or within the first _____ months of use
 - B. Faulty workmanship or unsatisfactory condition during delivery or commissioning
 - C. If a unit or accessory is deemed used item or refurbished item (not a new unit) by the user and BME Unit.
- _____ **time Planned Preventive Maintenance (PPM) PER YEAR** according to Manufacturer's Preventive Maintenance Guideline including PM kits and any other relevant parts to prolong equipment lifespan.

EXCLUSION FROM WARRANTY

MOH understand that the following circumstances are not covered in the warranty and Tenderer may quote for repair and subject to MOH approval:

- Unauthorized modifications - an alteration or repair by anyone other than the Manufacturer or Authorized agent during warranty period.
- Accidental damage or problems caused by negligence or mishandling, subject to appropriate justification by both parties.
- Vandalism and Natural disasters
- Normal wear and tear

ANY OTHER EXCLUSION

Tenderer may propose below to include items or terms which is not listed in the exclusion list above for MOH consideration.

TENDERER ACKNOWLEDGMENT

COMPANY CHOP AND SIGNATURE

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. OUR OFFER IS VALID FOR **TWELVE (12)** 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 _____, 2025.

Signature of authorised officer of Tenderer

Name:

Designation:

Tenderer's official stamp