

Rujukan Kami: (90) MOH/HQ/P/IKLAN-SH/2025

LAMPIRAN 2

BIL	Quotation Reference	Description	Advertisement Date	Closing Date (Not Later Than 09.00AM)	Quotation Fee	Requesting Department
2	PPM/PROC/2025/ <50K/002 (VIR) - IKN	TO SUPPLY, DELIVER, INSTALL AND COMMISSION DUAL-SIDED CARD PRINTER FOR NATIONAL VIROLOGY REFERENCE LABORATORY, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH.	23/06/2025	12/07/2025	\$5.00	NATIONAL VIROLOGY REFERENCE LABORATORY, MINISTRY OF HEALTH.

DEPARTMENT OF LABORATORY SERVICES  
R.I.P.A.S HOSPITAL  
BANDAR SERI BEGAWAN BA1710  
BRUNEI DARUSSALAM



جابتن فرخدمتن معمل

JABATAN PERKHIDMATAN MAKMAL  
HOSPITAL RAJA ISTERI  
PENGIRAN ANAK SALEHA  
BANDAR SERI BEGAWAN BA1710  
NEGARA BRUNEI DARUSSALAM

Telephone : 02-242424 ext. 6317/6313

Telefax : 02-220869

Rujukan Kami :  
Our Reference : PPM/PROC/ 2025/<50K/002(VIR) - IKN

Tarikh : 12 Zulhijjah 1446H  
Date : 09 Jun 2025M

Messrs: ALL SUPPLIERS  
Dear Sir/Madam,

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

TO SUPPLY, DELIVER, INSTALL AND COMMISSION DUAL-SIDED CARD PRINTER FOR NATIONAL VIROLOGY  
REFERENCE LABORATORY, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH.

QUOTATION  
(QUOTATION FEE: B\$5.00 NON REFUNDABLE)

Please send your price quotation, CIF Brunei by Air/surface for the following

SPECIFICATIONS AS PER ATTACHED LIST

(DELIVERY PERIOD: 4 – 6 weeks after issue of Purchase Order)

(SM01A/005000/0050032105 – PEROLEHAN ASET)

DEPT: NATIONAL VIROLOGY REFERENCE LABORATORY  
ATTN: HJH MAZMAH BINTI HJ AHMAD MORSHIDI

CLOSING DATE : 12 JUL 2025  
TIME : 2.00 p.m  
PLACE OF SUBMISSION : Quotation Box, (Ground Floor)  
Ministry of Health  
Negara Brunei Darussalam

Telefax : 02-220869

Copy of business registration brochures and samples must be submitted with the quotation within seven (7) days of the closing date. Kindly states the brand, model, manufacturer, price validity, delivery and warranty period and submit your quotation in duplicate together with the copy of your quotation fee receipt. Please quote our reference as above on the envelope as well as on the quotation. For further details, please contact the user as above.

"Bersama Ke Arah Warga Sehat"  
"Kelestarian Alam, Warisan Kitani Bersama"

Yours Sincerely,

والسلام

[DR HJH NOR AZIAN BINTI HAJI HAFNEH]

Acting Director  
Department of Laboratory Services  
Ministry of Health  
Brunei Darussalam

Telephone : 02-242424 ext. 6317/6313

Telefax : 02-220869

Cc:

- ✓ Pengerusi Jawatankuasa Sebutharga, Unit Tawaran
- ✓ Ketua Bahagian Makmal Rujukan Virologi Kebangsaan
- ✓ PPM/PROC/2025/<50K/002(VIR) – Iklan Sebutharga

## EQUIPMENT PURCHASE SPECIFICATION

QUOTATION /TENDER REFERENCE NO.	
TITLE OF QUOTATION / TENDER	TO SUPPLY, DELIVER, INSTALL AND COMMISSION DUAL-SIDED CARD PRINTER FOR NATIONAL VIROLOGY REFERENCE LABORATORY, DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH.

NO.	USER'S REQUIREMENT		VENDOR'S OFFER			
	ITEM DESCRIPTIONS AND SPECIFICATIONS	QUANTITY	ITEM DESCRIPTIONS AND SPECIFICATIONS	COMPLY / NOT COMPLY	COST PER UNIT (B\$)	TOTAL COSTS (B\$)
1	Dual sided card printer that features dye-sublimation direct-to-card printing technology and a print resolution of at least 300 dpi. The printer should have a print speed of up to 180 cards per hour (single-sided) and have connectivity options of USB2.0 and/or Ethernet 100BaseT to integrate into our system	1				
2	Ink ribbons that are able to produce yellow/magenta/cyan/black/overlay colours on both sides of the cards	1				
3	A premium software that allows storage of multiple card layouts and access of database	1				
4.1	RFID Cards with dimensions of at least 85mm in length and 54mm in height as identification and door access card	500				
4.2	Vendor to ensure RFID cards are compatible with access doors of all locations within the Department of Laboratory Services which include but not limited to Reference Laboratories in RIPAS Hospital, Sumbiling and District Laboratories.					
5	<b>WARRANTY</b> Vendor shall provide an extended warranty for the offered instruments up to three (3) years of its life. This warranty					

NO.	USER'S REQUIREMENT		VENDOR'S OFFER			
	ITEM DESCRIPTIONS AND SPECIFICATIONS	QUANTITY	ITEM DESCRIPTIONS AND SPECIFICATIONS	COMPLY / NOT COMPLY	COST PER UNIT (B\$)	TOTAL COSTS (B\$)
	shall cover all service works, technical support, periodic and preventive maintenance, spare parts and replacements.					
6	<b>INSTALLATION AND COMMISSIONING</b>					
6.1	Vendor shall verify the installation of offered printer and submit to the User a copy of signed Delivery Order and a copy of user verified Installation Qualification Report.					
7	<b>TRAINING</b> Training shall be provided, at no additional cost, as follows:					
7.1	On-site training for ALL staff members expected to handle the printer. Please ensure that adequate time is allocated such that training will take place in small groups to minimize staff shortage in the laboratory.					
8	<b>DELIVERY PERIOD:</b> Preferably 4 – 6 weeks after issue of Purchase Order		(Yes / No) (If No, please specify)			
9	<b>PRICE VALIDITY:</b> The quotation shall remain valid for 6 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).					

\* 6 months validity required for <\$50K or 12 months for >\$50K

ª Only applicable for equipment valued at >\$100K

<b>DELIVERY PERIOD AFTER PO ISSUED</b>	<b>4-6 weeks</b>		
Lab/Section/Unit	NATIONAL VIROLOGY REFERENCE LABORATORY		
Lab/Section/Unit Ref No.:	DLS/PU/VIR/2025/B50K/01		
Person to Contact	Name : HJH MAZMAH HJ AHMAD MORSHIDI		
	E-mail : mazmah.morshidi@moh.gov.bn		
	Tel.No. : 2221821	Fax No. : 2220869	
<b>FOR ADMINISTRATION USE ONLY</b>			
PPM/PROC Ref.No.	PPM/PROC/2025/<50K/002(VIR)		
Advertisement Ref. No.		Date :	