## Rujukan Kami: (109) MOH/HQ/P/IKLAN-SH/2025

## LAMPIRAN 6

BIL	Quotation Reference	Description	Advertisement Date	Closing Date (Not Later Than 09.00AM)	Quotation Fee	Requesting Department
6	(107) PSD/QTN/2025 – (SSBH)	TO SUPPLY AND DELIVER OF DISPOSABLE SPO2 SENSOR FOR OBSTETRIC AND GYNECOLOGY (O&G) DEPARTMENT, SURI SERI BEGAWAN (SSB) HOSPITAL, MINISTRY OF HEALTH	04/08/2025	23/08/2025	\$5.00	HOSPITAL SURI SERI BEGAWAN, KUALA BELAIT, KEMENTERIAN KESIHATAN

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

QUOTATION/TENDER REFERENCE NO:	
QUOTATION/TENDER NAME:	TO SUPPLY AND DELIVER OF DISPOSABLE SPO2 SENSOR FOR OBSTETRIC AND GYNECOLOGY (O&G) DEPARTMENT, SURI SERI BEGAWAN (SSB) HOSPITAL, MINISTRY OF HEALTH (CLUSTERING).

	USER'S REQUIREMENTS		VENDOR'S OFFER					
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	TOTAL QUANTITY	ITEM DESCRIPTIONS AND SPECIFICATIONS	PART/ CATALOGUE NUMBER AND BRAND	PACKING SIZE	TOTAL QUANTITY OFFERED	COST PER PACK (COST PER UNIT) (B\$)	TOTAL COSTS (B\$)
1	DISPOSABLE SPO2 SENSOR  • Neonatal/Adult Nellcor disposable SPO2 Sensor  • Adhesive type  • Product code: MAX-N-I  • Packaging: 1 box of 24s	600 pcs						
	TOTAL PRICE (B\$)							

NO	TERMS AND CONDITIONS	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 MAY cause DISQUALIFICATION OF QUOTATION/TENDER.	
4	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.	
5	All consumables supplied throughout this tender shall 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.	
6	Brochures / catalogues should be submitted / attached with quotation/tender document.	
7	Samples should be submitted together with quotation/ tender or within fourteen (14 days) of the quotation/tender closing date (if applicable).	
	DELIVERY PERIOD:	(Yes / No)
8	Not later than 8 weeks Staggered delivery upon request	(If No, please specify)
	PRICE VALIDITY:	
9	The quotation shall remain valid for <b>12 MONTHS</b> 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).	

## FOR QUOTATION ONLY

TERMS AND CONDITIONS							
a.	Tenderer must be registered with the Ministry of Health.		Company's Official Stamp				
b.	Please fill in the QUOTATION FORM completely including the USER REQUIREMENT FORM (if available). Submission of incomplete form MAY cause DISQUALIFICATION OF QUOTATION.	I hereby certify the above quote to be correct.  Signature:					
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 <b>TIPPEX</b> for amendment.	Designation:  Date:					