

Rujukan Kami: **(110) MOH/HQ/P/IKLAN-SH/2025**

LAMPIRAN 1

BIL	Quotation Reference	Description	Advertisement Date	Closing Date (Not Later Than 09.00AM)	Quotation Fee	Requesting Department
1	283/CPC/2025/IKLAN/MOH	SUPPLY. DELIVERY, INSTALLATION, TESTING AND COMMISSIONING OF TYMPANIC THERMOMETER FOR MINISTRY OF HEALTH	05/08/2025	23/08/2025	\$5.00	JABATAN TEKNOLOGI PENJAGAAN KESIHATAN, KEMENTERIAN KESIHATAN

SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONING OF TYMPANIC THERMOMETER FOR MINISTRY OF HEALTH

	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/MODEL WITH ONE PRICE ONLY for each item. Submission of more than one brand/model 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 (if applicable). 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 (if applicable).	
5	Brochures / catalogues should be submitted / attached with tender document.	
6	Any room renovation which may be required, it is mandatory to conduct site visit (if applicable)	
7	Samples should be submitted together with tender or within fourteen (14 days) of the tender closing dates (if applicable).	
8	DELIVERY PERIOD: (Please state) Not More Than 90 days upon confirmation	
9	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).	
10	The equipment supplied must be newly manufactured, unused, and in its original, sealed packaging. The equipment must not be previously owned, refurbished, or reconditioned in any form.	
11	The vendor is required to provide proof of manufacture date confirming the equipment is new.	
12	To provide justification for the price increase of a product previously supplied to the Ministry of Health by the same supplier/distributor	

**SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONING OF TYMPANIC THERMOMETER
FOR MINISTRY OF HEALTH**

SECTION 1 – USER REQUIREMENTS				
1. STANDARD FEATURES				
Category	DESCRIPTION	Tick (✓)		STATE OR SPECIFY OR REMARKS OR BROCHURE PAGE
		Y	N	
Quantity	TOTAL: 310 units; <ul style="list-style-type: none"> Fifty (50) units for EMAS Two hundred and sixty (260) units FOR Health Services 			
Measured temperature type	Tympanic (ear) infrared			
Measurement Range	34.0 °C to 42.2 °C or equivalent			
Temperature reading	In degree Celsius (°C)			
Measurement time	≤ 2 seconds or better			
Accuracy	±0.2 °C or better			
Display	Backlit digital display			
Power	Battery operated, AA or AAA battery			
	Auto power-off			
Hygiene accessories	Disposable, latex-free probe covers			
Accessories	Include supply of 100pcs of disposable probe covers per unit of thermometer			

2. WARRANTY				
1	Tenderer to include warranty period of at least 6 months			
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.			

3. 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: <ul style="list-style-type: none"> Basic user operation, user troubleshooting and user maintenance Provide Operating manual (Hardcopy and/or Softcopy) 			
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.			

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

**SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONING OF TYMPANIC THERMOMETER
FOR MINISTRY OF HEALTH**

SECTION 3 - PROCUMENT 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 VALIDTY]			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)	LOCAL		<input type="checkbox"/> Trained / Certified <input type="checkbox"/> Not yet trained on the product		
Please provide training or certification for locals who is trained/certified	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)				

**SUPPLY, DELIVERY, INSTALLATION, TESTING AND COMMISSIONING OF TYMPANIC THERMOMETER
FOR MINISTRY OF HEALTH**

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 and to include one-time replacements of battery at the end of 2 years warranty period or 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