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

QUOTATION/TENDER NAME:	SUPPLY, DELIVERY AND INSTALL OF HEAVY-DUTY SHELVING RACKS, HOSPITAL SURI SERI BEGAWAN (SSB), MINISTRY OF HEALTH (CLUSTERING).
QUOTATION/TENDER REFERENCE NO:	

	USER'S REQUIREMENTS			VENDOR'S OFFER					
NO	ITEM DESCRIPTIONS AND SPECIFICATIONS	PACKING SIZE	TOTAL QUANTITY USAGE	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.	Size: L240cm x H240cm x W60cm 4 shelves per set Loading up to 200kgs and above per shelve Structural steel frames and beams Heavy-duty plywood/shelves Powder-coated or galvanized to resist corrosion in industrial environments.	Sets	12						
2.	Size: L180cm x H240cm x W60cm 4 shelves per set Loading up to 200kgs and above per shelve Structural steel frames and beams Heavy-duty plywood/shelves Powder-coated or galvanized to resist corrosion in industrial environments.	Sets	8						

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.	
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 QUOTATION/TENDER.	
4	Brochures / catalogues should be submitted / attached with quotation/tender document.	
5	Samples should be submitted together with quotation/ tender or within fourteen (14 days) of the quotation/tender closing date (if applicable).	
6	DELIVERY PERIOD: Not later than 8 weeks Staggered delivery upon request	(Yes / No) (If No, please specify)
7	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).	

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TERMS AND CONDITIONS						
a.	Tenderer must be registered with the Ministry of Health.	Acknowledgement:	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.	Name:				
d.	Please do not use TIPPEX for amendment.	Designation: Date:				