

**TENDER REFERENCE NO.: KK/365/2025/PPN**

**MINISTRY OF HEALTH  
NEGARA BRUNEI DARUSSALAM**

**CLINICAL/BIOHAZARD WASTE COLLECTION AND  
DISPOSAL SERVICES FOR NATIONAL DENTAL CENTRE,  
OLD AIRPORT, BANDAR SERI BEGAWAN FOR A PERIOD  
OF ONE (1) YEAR**

**TENDER FEES : \$10.00**

**RECEIPT NO. :**

**CLOSING DATE : ON TUESDAY, 06 January 2026**

**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

TENDER REFERENCE NO.: KK365/2025/PPN

**INVITATION TO TENDER**  
**CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL SERVICES FOR NATIONAL DENTAL CENTRE, OLD AIRPORT, BANDAR SERI BEGAWAN FOR A PERIOD OF ONE (1) YEAR**

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### SCOPE OF WORK

The Contractor shall:

#### Collection Point

1. Carry out Clinical (Biohazard) Waste Collection and Disposal Services from the National Dental Centre, Old Airport, Berakas (hereinafter collectively referred to as “the Collection Point”).

#### Collection Schedule

2. Collect the Waste from site according to the schedule as stated below:

COLLECTION POINT	NO. OF COLLECTIONS PER WEEK	TIME
i. National Dental Centre, Old Airport, Berakas	3 Times	7.00 am – 4.30pm

#### Dumping Ground

3. **Collect** the clinical and sharp bins waste from the **refuse Collection Point** and **transport** it to the **incinerator Plant Room at Raja Isteri Pengiran Anak Saleha (RIPAS) Hospital or any designated incinerator plant rooms within the state of Brunei Darussalam.**

#### Vehicles

4. Collect and transport the Waste from the Collection Point using **vehicles specially designated for such purposes.**
  - 4.1 Fully enclosed with driver's cab separated compartment.
  - 4.2 Should be marked with the name and address of the waste carrier.
  - 4.3 An international hazard sign should be displayed on the vehicle and containers, as well as an emergency telephone number.
  - 4.4 The waste compartment should be provided with adequate lighting and ventilation (air-conditioned), lockable doors and capable of being cleaned and disinfected.
  - 4.5 Equipped with decontamination and cleaning equipment and materials for dealing with spillages (PPE, disinfectant, mops, buckets etc).
5. Vehicles should be:
  - 5.1 Maintained in sound condition and cleaned at least once per week.
  - 5.2 Thoroughly cleaned and disinfected immediately following any spillage inside the vehicle or when contaminated with any clinical waste.
  - 5.3 Used for transporting clinical waste only.

- 5.4 Prohibited from carrying food or pharmaceutical products.
- 5.5 Prohibited from carrying any material other than clinical waste.
- 5.6 Prohibited from transportation of any other waste, material or substance during the course of the transportation of clinical waste.
- 6. Ensure that staff handling waste are:
  - 6.1 Competent, appropriately trained and preferably has obtained a certificate indicating their competency to transport hazardous wastes, and authorized to perform such duty.
  - 6.2 Immunised against Hepatitis B. In addition, immunisation against tetanus, hepatitis A, and typhoid is also recommended for all personnel handling wastes.
  - 6.3 Wear appropriate PPE such as overalls, industrial aprons, protection/safety boots, heavy duty gloves. Face masks and eye protectors (safety goggles).
  - 6.4 Ensure the waste bags are properly tied before handling and transporting.
  - 6.5 Not to carry waste bags or bins against their body e.g. shoulders, legs.
  - 6.6 Trained in first aid, needle stick injuries and spillage management.
  - 6.7 To provide quarterly updated list of staff that area authorized as of 6.1 and 6.6.
  - 6.8 Report any injuries and spillages during handling and transportation to Director of Dental Services.
- 7. Ensure that the collection of waste **shall not cause any inconvenience to the public and staff at National Dental Centre.**

#### **Cleaning of Waste Receptacles**

- 8. Leave all waste receptacles clean and tidy to the satisfaction of the officer-in-charge of the Collection Point.
- 9. Clean all waste spillage arising or occurring during collection or transportation immediately and provide suitable surface cleaners and disinfectants.

#### **Delivery of Clinical Waste to a Disposal Facility**

- 10. Clinical waste collected should be weighted at the collection point and recorded in a log book to be submitted monthly with invoice.
- 11. Once clinical waste is loaded onto a collection vehicle, the waste should stay in the same vehicle until it is delivered to the disposal facility.
- 12. No mixing of waste (e.g. domestic waste) is allowed on the vehicle.
- 13. Clinical waste should be delivered to disposal facility as soon as possible (within the same day).

#### **Notification**

- 14. The Contractor shall **notify** the officer-in-charge of the Clinics **within 24 hours of any disruption in the schedule of collection.**

### Quality of Service

15. Ensure that the Services provided under the Agreement are of high quality and conform to the Specifications.
16. Institute strict procedure for the prevention of cross-infection.

### Penalties

17. The Dental Services Department reserves the right to impose a penalty/penalties amounting to a sum equal to \$50 for each day or part thereof of such failure or delay in the event the Contractor fails or is unable to carry out the services within the time specified.
18. The Dental Services Department **reserve the right to engage another contractor** to execute the waste collection and disposal services if the Contractor **fails to perform** the services required. The **costs** of the services provided by any such contractor **shall be deducted proportionately from any moneys due** to the Contractor.

### Claims

19. The Contractor shall prepare and submit invoices **on a monthly basis** together with Work Order (Appendix 1).
20. **Work Order** and **invoices** must be certified by the Office Supervisor in-charge of the clinic before the payment can be processed.
21. The claims shall be submitted not later than the first week of the following month and address to:

***The Permanent Secretary Ministry of Health  
(Attention: Chief Executive Officer Department of Dental Services)  
Bandar Seri Begawan, BB3510  
Negara Brunei Darussalam***

## WORK ORDER

## PERKHIDMATAN PENGANGKUTAN DAN PEMBUANGAN SAMPAH

- DOMESTIC
- CLINICAL/BIOHAZARD

NAMA JABATAN

PUSAT PERGIGIAN NEGARA, AIRPORT LAMA, BERAKAS, JABATAN  
PERKHIDMATAN PERGIGIAN

NAMA PEMBORONG

BILANGAN TAWARAN

PERKHIDMATAN  
BULAN

Jan	Feb	Mac	Apr	Mei	Jun	Jul	Ogos	Sept	Okt	Nov	Dis	Tahun

## PERKHIDMATAN MINGGU PERTAMA

BIL	HARI	TINDAKAN		TARIKH	CATATAN		
		YA	TIDAK		NO. BOX/WT	NO. BAGS/WT	TOTAL/WT
1							
2							
3							

## PERKHIDMATAN MINGGU PERTAMA

BIL	HARI	TINDAKAN		TARIKH	CATATAN		
		YA	TIDAK		NO. BOX/WT	NO. BAGS/WT	TOTAL/WT
1							
2							
3							

## PERKHIDMATAN MINGGU PERTAMA

BIL	HARI	TINDAKAN		TARIKH	CATATAN		
		YA	TIDAK		NO. BOX/WT	NO. BAGS/WT	TOTAL/WT
1							
2							
3							

## PERKHIDMATAN MINGGU PERTAMA

BIL	HARI	TINDAKAN		TARIKH	CATATAN		
		YA	TIDAK		NO. BOX/WT	NO. BAGS/WT	TOTAL/WT
1							
2							
3							

## PERKHIDMATAN MINGGU PERTAMA

BIL	HARI	TINDAKAN		TARIKH	CATATAN		
		YA	TIDAK		NO. BOX/WT	NO. BAGS/WT	TOTAL/WT
1							
2							
3							

## UNTUK KEGUNAAN JABATAN PERKHIDMATAN PERGIGIAN

Ulasan

Cop dan Tandatangan

**SECTION 3**

**TENDER FORM**

To:

**TENDER REFERENCE NO.: KK365/2025/PPN**

**INVITATION TO TENDER**

**CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL SERVICES FOR NATIONAL DENTAL CENTRE, OLD AIRPORT, BANDAR SERI BEGAWAN FOR A PERIOD OF ONE (1) YEAR**

ITEM NO.	DESCRIPTION	QTY	UNIT	RATE (\$) (PER COLLECTION)	AMOUNT
(i)	CLINICAL/BIOHAZARD WASTE COLLECTION AND DISPOSAL SERVICES FOR NATIONAL DENTAL CENTRE, OLD AIRPORT FOR A PERIOD OF ONE (1) YEAR	3	Collection Time per week		
Total Contract Amount Per Week					
Total Contract Amount Per Month (x 4)					
Total Annual Contract Amount (x 12)					
Total Overall Contract Amount for 1 Year (x 1)					

**Note: The Contractor shall ensure that any matters concerned the above services are to be communicated directly to the relevant Management (Management of Department of Dental Services) including pricing, claims/payment and collection schedule.**

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 \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
**Signature of authorised officer of Tenderer**

Name:

Designation:

Tenderer's official stamp