

TENDER REF. NO.: KK/181/2026/HTD

**MINISTRY OF HEALTH
NEGARA BRUNEI DARUSSALAM**

**SUPPLY, DELIVER, INSTALLATION, TESTING AND
COMMISSIONING OF ULTRA LOW FREEZER FOR
DEPARTMENT OF LABORATORY SERVICES, MINISTRY
OF HEALTH**

TENDER FEE : \$30.00

RECEIPT NO. :

CLOSING DATE : ON TUESDAY, 18th August 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

SPECIFICATIONS AND REQUIREMENTS

TENDER REFERENCE NO.: KK/181/2026/HTD

INVITATION TO TENDER

SUPPLY, DELIVER, INSTALLATION, TESTING AND COMMISSIONING OF ULTRA LOW FREEZER FOR DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH

SCOPE OF WORK		
Supply, deliver and install 6 units of Ultra Low Freezer (-80C) with staggered deliveries scheduled over a two-year period .		
Summary of total numbers and distribution list are as follow:		
Location	Distribution	Total Quantity
YEAR 1	- National Virology Reference Lab (NVRL) - National Mycobacteriology Reference Lab, Clinical Molecular Diagnostic Laboratory Infectious Diseases (NMRL, CMDLID) - Blood Transfusion Section, PMMHL - National Clinical Chemistry Reference Lab (NCCRL)	4
YEAR 2	- Blood Donation Centre (BDC) - National Blood Transfusion Reference Lab (NBTRL)	2
Total		6

ITEMS	DETAILS
General:	The Ultra-Low Temperature (ULT) freezer shall be suitable for the long-term storage and preservation of blood bags and biological samples
Cabinet Material:	High-quality, durable construction using polyurethane foam insulation combined with vacuum insulated panels (VIP) for superior thermal efficiency.
Outer Finish:	Corrosion-resistant, powder-coated steel or equivalent.
Inner Chamber:	Stainless steel or high-grade coated steel for easy cleaning and durability.
Outer Door:	Single solid outer door with ergonomic handle on the left-hand side, featuring a secure latch mechanism and key lock for safety.
Inner Doors:	Minimum of five (5) inner doors to minimize cold air loss during access.
Gasket:	Multi-layered, easily replaceable door gasket ensuring airtight sealing.
Casters/Leveling Feet:	Heavy-duty casters for mobility with lockable front wheels or leveling feet for stability.
Material of freezer body and door:	Polyurethane foam and vacuum insulated panels
External dimension	- Due to space constraint, - W x D x H of not more than 1290 x 890 x 2000 mm
Effective Capacity:	Between 729 – 750 litres.
Compliance	Comply to American Association of Blood Banks (AABB) Standards or EU Medical Device Certification
Temperature Control Range:	Adjustable from –50°C to –80°C.
Temperature Uniformity:	±3°C or better across the storage chamber.
Pull-Down Time:	Specify the time required to reach –80°C from ambient temperature (shorter pull-down time is preferred).
Cooling System:	Dual independent compressors for redundancy and energy efficiency.
Refrigerant:	CFC-free and environmentally friendly refrigerants compliant with international standards.
Compartments/Shelves:	Minimum of five (5) adjustable shelves or compartments.
External Sensor Port:	At least one (1) external access port for insertion of third-party temperature or data sensors.
Compartments/Shelves:	Minimum of five (5) adjustable shelves or compartments.
	Digital microprocessor-based controller with display showing setpoint and actual temperature.
Audible and visual alarms	for high/low temperature, power failure, door ajar, sensor error, and compressor malfunction.

ITEMS	DETAILS
Noise Level:	▪ Low noise operation (<52 dB preferred).
Chart reorder	▪ Included with integrated chart recorder inclusive with its chart paper
UPS	▪ One (1) UPS unit to be supplied with each freezer.
	- Supply one (1) unit UPS to handle the freezer's running power and starting surge current of the compressor. - UPS rating to be determined by the tenderer based on freezer power and surge requirements.
	- Backup Duration: Minimum of 30 minutes at full load.
	- Warranty: Supplier to specify number of years warranty for UPS batteries.
	- Output Connections: Must include outlets compatible with 3-pin plug connections.
	- Submit UPS specifications including rated power, surge capacity, and battery runtime.
	- Features:
	✓ Automatic voltage regulation (AVR).
	✓ Audible/visual alarm for low battery and overload.
ONE (1) UNIT EXTERNAL THERMOMETER	▪ Each freezer shall be supplied with one (1) unit of a non-mercury verification thermometer designed to verify the temperature of samples stored in the freezer ▪ Please specify the thermometer temperature range
	▪ The thermometer shall be equipped with a digital display
	▪ an external temperature sensor/probe with a cable at least 1 meter long
	▪ It shall be calibrated and provided with a certificate of calibration traceable to NIST (National Institute of Standards and Technology).

2	OTHER REQUIREMENTS
	Vendor shall perform a performance verification upon commissioning and ensure the performance of the installed equipment is within the acceptable limit of performance or as per manufacturer's recommendations or as per User's acceptance criteria. Vendor shall submit a copy of user verified Performance Qualification Report.
	LITERATURE
	To supply one (1) USB or one (1) set of hard copy of the Operating Manual and Service Manual including circuit diagrams of the equipment shall be provided upon commissioning.
	To supply hardcopy of maintenance log with list of details of daily, weekly or scheduled maintenance
	TRAINING
	Training shall be provided, at no additional cost, as follows:
	On-site training for ALL staff members expected to handle the machine. Please ensure that adequate time is allocated such that training will take place in small groups to minimize staff shortage in the laboratory.
	Certificate of attendance and competence shall be issued to all trainees after completion of training.
	If necessary and required by the User, the successful vendor shall ensure the key users are updated on the current or relevant information related to the system used. Vendor shall provide ONE off-site training for two (2) key users. All expenses for attending the training shall be borne by the vendor; full registration, return air ticket, daily allowance, accommodation, transport to and from the airport and place of training.
3	TECHNICAL TRAINING
3.1	Introductory Technical Training to Biomedical Engineers and Technicians at BME Office by competent Tenderer's Engineer/Technicians that includes but not limited to: - Troubleshooting and basic corrective maintenance - Handling and basic inspection maintenance *(Two sessions/groups if required)
4	WARRANTY
4.1	Tenderer to include warranty period of at least TWO (2) years
4.2	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. This includes but not limited to: - Scope of Warranty - One-time Planned Preventive Maintenance Per Year during warranty - Comprehensive Corrective Maintenance of Main Unit

5	PRODUCT DEMONSTRATION
5.1	If requested by the Government, vendor shall provide a product demonstration as part of the evaluation process The tenderer shall provide either of the following demonstration modes: ▪ Physical Demonstration (In-Person): A complete working unit must be brought to the designated demonstration site as specified by the procuring entity. The demonstration shall be conducted by qualified personnel from the supplier. ▪ Online Demonstration (Virtual): The demonstration may be conducted via a live video conferencing platform (e.g., Zoom, MS Teams). The session must include: ✓ Live operation of the actual product. ✓ Real-time interaction to address questions or perform requested functions. ✓ High-definition video and clear audio for full visibility and understanding.

SECTION 2 – PRICE PROPOSAL	
PURCHASE PRICE	PER UNIT
	YEAR 1
	YEAR 2
	TOTAL

SECTION 3 - PROCUMENT AND TECHNICAL SPECIFICATION	
BRAND:	MODEL:
COUNTRY OF ORIGIN:	YEAR INTRODUCED TO MARKET:
WARRANTY PERIOD:	LAST COUNTRY SOLD TO:
PRICE VALIDITY: [AT LEAST <u>ONE (1) YEAR</u> PRICE VALIDTY]	DELIVERY TIME:

SECTION 3 - PROCUMENT AND TECHNICAL SPECIFICATION
AUTHORIZED DISTRIBUTOR: (AUTHORIZED DISTRIBUTOR LETTER ATTACHED)
DETAILED BROCHURE INCLUDED
USER AND SERVICE MANUALS:
MAINS POWER SUPPLY:
BATTERY
POWER ADAPTER/CHARGER OUTPUT RATING:
EQUIPMENT AMBIENT OPERATING TEMPERATURE RANGE:
INTERNATIONAL SAFETY STANDARD Must comply to at least 1 safety Standards and certification (Please attached the copy of stated standards and certifications)
NUMBER OF TECHNICAL SUPPORT (ENGINEER/TECHNICIAN) Please provide training or certification for locals who is trained/certified
DIMENSIONS AND WEIGHT OF MAIN UNIT:
EQUIPMENT WHOLE LIFE TIME SUPPORT:

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 extend 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:
 - 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.
- **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 warranty period or any other relevant parts to prolong equipment lifespan.
- In the event of any **breakdown call** during the warranty period, tenderer shall ensure a **response time not exceeding 60 minutes** from the receipt of the notification.

Response time refers to time taken from initial request by the user to the time trained technical personnel is physically present to assess the request.

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.

NO.	TERMS AND CONDITIONS
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 <u>MAY</u> cause DISQUALIFICATION OF 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 TENDER.
4	Brochures / catalogues should be submitted / attached with tender document.
5	DELIVERY PERIOD: (Please state) Not More Than 90 days upon confirmation
6	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).
7	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. During delivery , the vendor is required to provide proof of manufacture date confirming the equipment is new.

SECTION 3
TENDER FORM

To:

TENDER REFERENCE NO.: KK/181/2026/HTD

INVITATION TO TENDER
SUPPLY, DELIVER, INSTALLATION, TESTING AND COMMISSIONING OF ULTRA LOW
FREEZER FOR DEPARTMENT OF LABORATORY SERVICES, MINISTRY OF HEALTH

SCOPE OF WORK			
Please ☒ Tick where appropriate	Yes	No	Remarks
Supply, deliver and install 6 units of Ultra Low Freezer (-80C) with staggered deliveries scheduled over a two-year period .			
Summary of total numbers and distribution list are as follow:			

LOCATION	DISTRIBUTION	TOTAL QUANTITY
YEAR 1	▪ National Virology Reference Lab (NVRL) ▪ National Mycobacteriology Reference Lab, Clinical Molecular Diagnostic Laboratory Infectious Diseases (NMRL, CMDLID) ▪ Blood Transfusion Section, PMMHL ▪ National Clinical Chemistry Reference Lab (NCCRL)	4
YEAR 2	▪ Blood Donation Centre (BDC) ▪ National Blood Transfusion Reference Lab (NBTRL)	2
Total		6

Please ☒ Tick where appropriate		Yes	No	Remarks
ITEMS	DETAILS			
General:	The Ultra-Low Temperature (ULT) freezer shall be suitable for the long-term storage and preservation of blood bags and biological samples			
Cabinet Material:	High-quality, durable construction using polyurethane foam insulation combined with vacuum insulated panels (VIP) for superior thermal efficiency.			
Outer Finish:	Corrosion-resistant, powder-coated steel or equivalent.			
Inner Chamber:	Stainless steel or high-grade coated steel for easy cleaning and durability.			
Outer Door:	Single solid outer door with ergonomic handle on the left-hand side, featuring a secure latch mechanism and key lock for safety.			
Inner Doors:	Minimum of five (5) inner doors to minimize cold air loss during access.			
Gasket:	Multi-layered, easily replaceable door gasket ensuring airtight sealing.			
Casters/Leveling Feet:	Heavy-duty casters for mobility with lockable front wheels or leveling feet for stability.			
Material of freezer body and door:	Polyurethane foam and vacuum insulated panels			
External dimension	Due to space constraint, W x D x H of not more than 1290 x 890 x 2000 mm			
Effective Capacity:	Between 729 – 750 litres.			
Compliance	Comply to American Association of Blood Banks (AABB) Standards or EU Medical Device Certification			
Temperature Control Range:	Adjustable from –50°C to –80°C.			
Temperature Uniformity:	±3°C or better across the storage chamber.			
Pull-Down Time:	Specify the time required to reach –80°C from ambient temperature (shorter pull-down time is preferred).			
Cooling System:	Dual independent compressors for redundancy and energy efficiency.			
Refrigerant:	CFC-free and environmentally friendly refrigerants compliant with international standards.			
Compartments/Shelves:	Minimum of five (5) adjustable shelves or compartments.			
External Sensor Port:	At least one (1) external access port for insertion of third-party temperature or data sensors.			
Compartments/Shelves:	Minimum of five (5) adjustable shelves or compartments.			

Please ☒ Tick where appropriate		Yes	No	Remarks
ITEMS	DETAILS			
	Digital microprocessor-based controller with display showing setpoint and actual temperature.			
Audible and visual alarms	for high/low temperature, power failure, door ajar, sensor error, and compressor malfunction.			
Noise Level:	Low noise operation (<52 dB preferred).			
Chart reorder	Included with integrated chart recorder inclusive with its chart paper			
UPS	One (1) UPS unit to be supplied with each freezer.			
	Supply one (1) unit UPS to handle the freezer's running power and starting surge current of the compressor.			
	UPS rating to be determined by the tenderer based on freezer power and surge requirements.			
	Backup Duration: Minimum of 30 minutes at full load.			
	Warranty: Supplier to specify number of years warranty for UPS batteries.			
	Output Connections: Must include outlets compatible with 3-pin plug connections.			
	Submit UPS specifications including rated power, surge capacity, and battery runtime.			
	Features:			
	✓ Automatic voltage regulation (AVR).			
	✓ Audible/visual alarm for low battery and overload.			
One (1) unit External thermometer	Each freezer shall be supplied with one (1) unit of a non-mercury verification thermometer designed to verify the temperature of samples stored in the freezer			Specify:
	Please specify the thermometer temperature range			
	The thermometer shall be equipped with a digital display			
	an external temperature sensor/probe with a cable at least 1 meter long			
	It shall be calibrated and provided with a certificate of calibration traceable to NIST (National Institute of Standards and Technology).			

Please ☒ Tick where appropriate		Yes	No	Remarks
2	OTHER REQUIREMENTS			
	Vendor shall perform a performance verification upon commissioning and ensure the performance of the installed equipment is within the acceptable limit of performance or as per manufacturer's recommendations or as per User's acceptance criteria. Vendor shall submit a copy of user verified Performance Qualification Report.			
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	To supply hardcopy of maintenance log with list of details of daily, weekly or scheduled maintenance			
	TRAINING			
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3.1	Introductory Technical Training to Biomedical Engineers and Technicians at BME Office by competent Tenderer's Engineer/Technicians that includes but not limited to: - Troubleshooting and basic corrective maintenance - Handling and basic inspection maintenance *(Two sessions/groups if required)			
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SECTION 2 – PRICE PROPOSAL		
PURCHASE PRICE	PER UNIT	BND\$
	YEAR 1	BND\$
	YEAR 2	BND\$
	TOTAL	BND\$

SECTION 3 - PROCUMENT AND TECHNICAL SPECIFICATION			
BRAND:		MODEL:	
COUNTRY OF ORIGIN:		YEAR INTRODUCED TO MARKET:	
WARRANTY PERIOD:		LAST COUNTRY SOLD TO:	
PRICE VALIDITY: [AT LEAST <u>ONE (1) YEAR</u> PRICE VALIDTY]		DELIVERY TIME:	

SECTION 3 - PROCUREMENT AND TECHNICAL SPECIFICATION										
AUTHORIZED DISTRIBUTOR: (AUTHORIZED DISTRIBUTOR LETTER ATTACHED)	APPOINTED BRUNEI DISTRIBUTOR									
		PROCURE FROM OVERSEA AUTHORIZED DISTRIBUTOR				COMPANY NAME:				
						COMPANY ORIGIN:				
DETAILED BROCHURE INCLUDED		YES		NO	☒ 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:										
INTERNATIONAL SAFETY STANDARD Must comply to at least 1 safety Standards and certification (Please attached the copy of stated standards and certifications)					☒ Tick where appropriate ☐ US FDA Standard, ☐ European Union CE MARK, ☐ Australian TGA Standard, ☐ Canadian CSA Standard or ☐ Japanese JIS Standard. Others (Please specify):					
NUMBER OF TECHNICAL SUPPORT (ENGINEER/TECHNICIAN) Please provide training or certification for locals who is trained/certified	LOCAL				☐ Trained / Certified ☐ Not yet trained on the product					
	OVERSEA (SPECIFY LOCATION)			NEAREST LOCATION:						
DIMENSIONS AND WEIGHT OF MAIN UNIT:			☐ mm ☐ cm ☐ inch			☐ Kilogram (Kg) ☐ Gram(g) ☐ Pound (lbs)				
EQUIPMENT WHOLE LIFE TIME SUPPORT:	The supplier shall ensure that spare parts for the equipment are available for a minimum of 10 years after installation, with the support period extending beyond the expected lifecycle of the equipment. No of years: _____ (Please specify)									

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:
 - 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.
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MOH understand that the following circumstances are not covered in the warranty and Tenderer may quote for repair and subject to MOH approval:

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- 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

NO.	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 WITH ONE PRICE ONLY for each item. Submission of more than one brand and price will cause DISQUALIFICATION OF TENDER .	
4	Brochures / catalogues should be submitted / attached with tender document.	
5	DELIVERY PERIOD: (Please state) Not More Than 90 days upon confirmation	
6	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).	
7	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. During delivery , the vendor is required to provide proof of manufacture date confirming the equipment is new.	

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 no 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