THE PURCHASE OF NETWORK ACCESS STORAGE FOR BRUHIMS APPLICATION AND DATABASE BACKUP AT PMMPMHAB HOSPITAL - MOH/HTD/T21/2026							
Item	*Description*	*Qty*	*Comply? (Y/N)*	*Please Specify the Equipment & Specification*	*Unit Price*	*Total Cost*	*Remarks*
1.0	**The Purchase of Network Access Storage for BruHIMS Application System dan Database Backup at PMMPMHAB Hospital**						
1.1	**Network Attached Storage (NAS) Enclosure**	1					
	Brand: Synology DS1825+ or equivalent						
	CPU: Quad-core AMD Ryzen R1500B 2.2 GHz						
	RAM: Minimum 8 GB DDR4 (expandable up to 32 GB)						
	Drive Bays: 8 bays for 3.5"/2.5" SATA HDD/SSD						
	Maximum Raw Capacity: 108 TB (8nos. of 12 TB HDDs)						
	Network Interface: 2 x 2.5GbE LAN ports (expandable via PCIe)						
	USB Ports: 3 x USB 3.2 Gen 1 ports						
	PCIe Slots: 2 x M.2 2280 NVMe SSD Cache						
1.2	**Network Attached Storage (NAS) Internal Hard Disk Drive**	10					
	Brand: Synology HAT3310-12T or equivalent						
	Size: 12TB NAS SATA Internal Hard Disk Drive						
	Form Factor: 3.5 inch						
	Transfer Rate: up to 260MB/s						
	Disk Speed: 7200rpm						

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1.3	**Dual-port 10GbE SFP+ PCIe 3.0 Card**	1					
	Brand: Synology E25G30-F2 or equivalent						
	Network Interface: Dual-port 10 Gigabit Ethernet						
	Network Connector: 2 x SFP+ ports						
	Port: 10Gbps						
	Maximum Aggregate Throughput: Up to 20 Gbps using both ports, subject to network configuration□						
	Link Aggregation: IEEE 802.3ad Link Aggregation						
	Host Interface: PCI Express (PCIe) 3.0 x8 or better						

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Item	***Description***	***Qty***	***Comply? (Y/N)***	***Please Specify the Equipment & Specification***	***Unit Price***	***Total Cost***	***Remarks***
					Total Amount :		
	Warranty :						
	Exstock (immediate else specify):						
	Quotation validity :	6 Month					
	Please Also Observe The Following: ***a. Quotation Validity: 6 months*** ***b. Please fill up all the blanks, specify requirements as stated above***	*Acknowledgement:* Company Ref. No.: ..... **I hereby certify the above quote to be correct.** Signature: ..... Designation: ..... Email: ..... Date :			***Company's Official Stamp:***		