



Expression of Interest (EOI)

Healthy Food Van Operation at the Ministry of Health Parking Lot

(Ref: MOH/EOI/2026/SEP/001)

The Government through Ministry of Health Brunei Darussalam ("MOH") are seeking passionate and health-conscious food van operators to provide healthy food options at the MOH parking lot. Interested Vendors are invited to submit their Expression of Interest (EOI), in operating food van at the MOH designated parking lot.

The food van should be operational to serve both MOH personnel and visitors at the building. MOH will provide the space **free of charge**.



Submission for participation of this EOI can be done by filling in the forms via this link: <https://forms.cloud.microsoft/r/dJMnVMtSg7>
or
by scanning the QR Code.



Scan the QR Code for the Terms and Conditions to the Healthy Food Van Operation at the Ministry of Health Parking Lot.

Terms and Conditions ("T&Cs") of this EOI apply.

MOH warmly invites prospective vendors to join an online Information Session regarding this initiative. Event details and joining instructions will be shared in due course.

EOI Submission Requirement:

The Vendor is requested to provide the following information in their submission:

1. Contact Information including:
 - a. Name of the Company;
 - b. Contact Person's Name;
 - c. Physical Address;
 - d. Contact Phone Number; and
 - e. Email Address.
2. Type of Vehicle:
Specify the type of vehicle employed: Food Truck, Towed Trailer, or Food Cart. Kindly provide accompanying photographs for visual reference.
3. Comprehensive Menu:
 - a. Enumerate the Food Items offered;
 - b. Provide Descriptive Explanations;
 - c. Highlight any Healthy Options available; and
 - d. Clearly state the Prices associated with each item.
4. Staff Strength:
Indicate the total number of staff members employed and deployed.

Completed EOI proposals must be submitted via email to **procurement@moh.gov.bn** on or before **Saturday, 17th October 2026, by 4:30 PM.**



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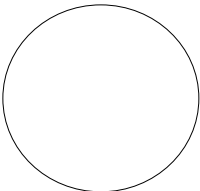
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Terms and Conditions ("T&Cs")

On receipt of the expressions of interest MOH may enter into negotiation with some or all of the respondents; or choose not to continue with this process. No contractual obligations to any party will result from this request of EOI. Subsequently, the vendor will be expected to adhere to the following requirements:

TERMS AND CONDITIONS	AGREE (Y/N)
a) Scope of work: The vendor shall: i) Operate the food van solely at the designated location within the MOH parking lot as detailed in Appendix A. ii) Provide and serve Halal-certified food and beverage items only. iii) Offer healthy menu choices, incorporating items such as fruits, vegetables, whole grains, lean proteins, and low-fat dairy options. iv) Manage customer orders and payment transactions promptly and efficiently. v) Possess and maintain all mandatory business licenses and permits issued by relevant local regulatory authorities. vi) Maintain cleanliness, orderliness, and proper waste management at the food van site and its surrounding premises. vii) Operate in alignment with official government working hours, including peak lunch hours.	
b) Registration of Company i) The Vendor must be registered with the Registry of Companies and Business Names (ROCBN), Ministry of FInance and submit a copy of its valid Business Registration Certificate; ii) Vendors whose Expression of Interest (EOI) submissions are approved will be considered registered vendors with the Ministry of Health (MOH).	

c) Monetary Issues i) Handle all financial transactions and resolve any transaction disputes directly with patrons; ii) Display clear and accurate pricing for all food and beverage items on offer; iii) Retain 100% of all revenue generated from the operation of the food van.	
d) Disposal of waste i) Waste generated from this activity will be the sole responsibility of the vendor. ii) MOH provides a specific waste disposal location where vendors can appropriately dispose of their waste.	
e) Others i) MOH shall be indemnified and not be held liable for any loss or damage that may occur in provision of the Service by the Vendor.	
Vendor Details:	
1. Company Name:	
2. Company Address:	
3. Contact Name:	
4. Contact Phone No.:	
5. E-mail Address:	
6. Other remarks:	
Declaration	
We, the Vendor stated above agrees to the Terms and Conditions set herein. _____ Signature Stamp Name: Designation: Date: Company	

Appendix A:

