



REQUEST FOR QUOTATION

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| <i>Enquiries Title</i> | PROVISION FOR FTTH HP NETWORK TO PROVIDE NEW FAT AT RBC AIRPORT. |
| <i>Enquiries No.</i> | TBB/PLN/OSP/FTTH/Q/MDG013/2017 - PR 100009232 |
| <i>Enquiries Opening</i> | MONDAY 13 TH NOVEMBER 2017 |
| <i>Enquiries Closing</i> | THURSDAY, 16 TH NOVEMBER 2017, BEFORE 2.00PM LOCAL TIME |
| <i>Eligibility</i> | REGISTERED WITH TELBRU UNDER OP1-3 CLASS |

Telekom Brunei Berhad is looking for a qualified vendors to execute the above work. Enquiries document can be obtained from TelBru Vendor Registration Unit, Supply Chain Management, Level 4, RBA Plaza, Jalan Sultan, Bs 8811, Bandar Seri Begawan, Negara Brunei Darussalam from **Monday to Thursday (8.00am – 11.30am and 1.15pm – 4.45pm)** and **Friday (7.45am – 11.15am and 2.15pm – 4.45pm)** no charges, or otherwise can be downloaded from <https://www.telbru.com.bn/eqquotes>

Note:

This is a Request for Quotation only and is in no way constitute as a firm Purchase Order or Contract. Telekom Brunei Berhad is not bound to accept the contractor's quotation in part or whole.

Please refer to our General Conditions of Purchase at <https://www.telbru.com.bn/scm/>

No correction fluid shall be used in the document. Errors shall be crossed out and initialized by the respective contractor. Any quotation found to be corrected using correction fluid will not be entertained.

Company's name and address is NOT REQUIRED to be printed on the envelope. Once shown, the quotation will be disqualified. Description on the quotation envelope shall include **Enquiries Title, Enquiries Number, Enquiries Opening and Enquiries Closing**. Enquiries submitted shall be addressed to:

CHAIRPERSON OF TELBRU QUOTATION COMMITTEE
LEVEL 4, RBA PLAZA, JALAN SULTAN, BS 8811,
BANDAR SERI BEGAWAN,
NEGARA BRUNEI DARUSSALAM

For TELEKOM BRUNEI BERHAD



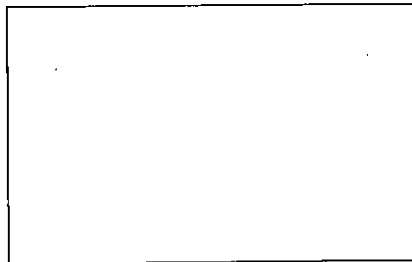
| NO. | BILL OF QUANTITIES | QUANTITY | UOM | UNIT PRICE | TOTAL PRICE |
|---------------------------|---|----------|-------|------------|-------------|
| 1 | REPAIR 1 WAY PVC WITH ENCASE | 10 | EACH | | |
| 2 | LOCATE AND RAISE MANHOLE LID | 4 | EACH | | |
| 3 | END TO END TEST FOR 1:8 FCW | 1 | EACH | | |
| 4 | COMMISSION TEST 96 CORE FIBRE OPTIC CABLE | 1 | EACH | | |
| 5 | INSTALL WALL MOUNT FAT CLSOURE (FCW) | 1 | EACH | | |
| 6 | FAT LABELLING | 1 | EACH | | |
| 7 | PULL 12 CORE FIBRE OPTIC CABLE (FOC) IN EXISTING DUCT | 900 | METRE | | |
| 8 | PULL 96 CORE FIBRE OPTIC CABLE (FOC) IN EXISTING DUCT | 3100 | METRE | | |
| 9 | ROD & ROPE 100MM EXTG DUCT | 4000 | METRE | | |
| 10 | SPLICE/TERMINATE 12 CORE FIBRE AT ODF AND FCP | 2 | EACH | | |
| 11 | SPLICE/TERMINATE 96 CORE FIBRE AT ODF AND FCP | 1 | EACH | | |
| 12 | FIBRE JOINT CLOSURE 72 TO 96 CORE | 1 | EACH | | |
| 13 | FIX CABLE TAG IDENTIFICATION FOR OPTICAL FIBRE CABLE | 6 | EACH | | |
| GRAND TOTAL 1PRICE | | | | | |

| NO. | BILL OF MATERIALS | QUANTITY | UOM | UNIT PRICE | TOTAL PRICE | BRAND |
|--------------------------|--|----------|-------|------------------|-------------|-------|
| 1 | 3M FIBRE JOINT CLOSURE 72 TO 96 CORE | 1 | EACH | | | |
| 2 | WALL MOUNT FAT CLOSURE (1:8) | 1 | EACH | SUPPLY BY TELBRU | | - |
| 3 | PIPE PVC 100MM X 6M X 3.5MM | 20 | EACH | SUPPLY BY TELBRU | | - |
| 4 | CABLE TAG IDENTIFICATION FOR FIBRE OPTIC | 6 | EACH | SUPPLY BY TELBRU | | - |
| 5 | OPTICAL FIBRE CABLE 12 CORE SINGLE MODE TYPE | 900 | EACH | SUPPLY BY TELBRU | | - |
| 6 | OPTICAL FIBRE CABLE 96 CORE (4000m/Drum) | 3,100 | METRE | SUPPLY BY TELBRU | | - |
| GRAND TOTAL PRICE | | | | | | |

| NO. | DESCRIPTION | AMOUNT |
|---------------------|--------------------|--------|
| 1.0 | BILL OF QUANTITIES | |
| 2.0 | BILL OF MATERIALS | |
| TOTAL AMOUNT | | |

- A. Implementation / Delivery period: **(please attach your project timeline)**
- B. Validity period:
- C. Warranty period:
- D. Company Name:
- E. Company Address:
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- F. TelBru's Registration Certificate: (please attach)
- G. Contact Person:
- H. Telephone No:
- I. Fax No:
- J. Email Address:
- K. Signature:
- L. Organization Chart (Specific for Project/staff assignment) : **(please attach)**
- M. Equipment List (Based on the work awarded on the BOQ and BOM): **(please attach)**
- N. Workmen's Compensation, Public Liability (3rd party insurance) and Work Permit for staff (not local) who will be involved in the above project **(please provide)**
- O. Manufacture / brand of the material: **(please stated)**

NOTE: PLEASE FILL IN ALL INFORMATION REQUIRED. INCOMPLETE INFORMATION COULD DISQUALIFY YOU FROM FURTHER CONSIDERATION.



COMPANY STAMP