

**RINGKASAN SEBUTHARGA
SUMMARY OF QUOTATION**

Tajuk / Title **PEST CONTROL SERVICES FOR 1(ONE) YEAR AT UNIVERSITI BRUNEI DARUSSALAM**

Bil. Sebutharga **UBD/Q/282/2024 [G]**

Quotation No.

Bil.	Keterangan / Description	Unit	Kadar / RATE	Jumlah Total	
				Kuantiti	\$
	Supply of Labour, materials, tools, equipment, scaffolding, transport and other things deemed necessary to be carried out the following works.				
1.0	Rodent control (rat, mice etc)				
a	Continuous employment of baited mechanical rat traps/glue trap at various locations as instructed by the S.O. Alternate day inspection of traps including extermination and disposal of rodent caught in a safe and S.O approved method for full duration of 12 (twelve) months contract period.	SERVICE		100	
b	Employment of S.O approved rodenticide in tamper proof baits boxes at various locations around UBD compound as instructed by the S.O with weekly inspection and changing of approved bait sduration of 12 (twelve) months contract period.				
	- All Canteen in UBD	MONTHS		12	
	- Food court HEP	MONTHS		12	
	- All Bin center	MONTHS		12	
	- UBD Stor	MONTHS		12	
2.0	Bees, Hornet, wasps etc.				
	To remove bees and bees hive as instructed by the S.O. around UBD compound using approved chemical and non-chemical using all necessary and labour, materials, tools, equipment, scaffolding, transport and other things deemed necessary. Response within 24 Hr				
2.1	Hight below 3 meters	Nos		50	
2.2	High above 3 meter	Nos		50	
3.0	Ants and Cockroaches control				
	To treatment of all possible breeding and harbourage areas such as canteen, kitchen, store, cabinets, cracks, equipment crevices, drainage, electrical boxes, garden surroundings, floor traps and sewerage manhole with insecticide formation.				
	(Treatment should be carried out twice a month)				
	- All Canteen in UBD	SERVICE		6	
	- Food court HEP	SERVICE		6	
	- All Bin center	SERVICE		6	
JUMLAH ARAHAN KERJA INI - DIBAWA KE DEPAN					
AMOUNT FOR THIS JOB ORDER - CARRIED FORWARD					

Bil.	Keterangan / Description	Unit	Kadar UBD / UBD RATE	Jumlah Total	
				Kuantiti	\$
JUMLAH ARAHAN KERJA INI - DIBAWA DARI DEPAN / AMOUNT FOR THIS JOB ORDER - BROUGHT FORWARD					
4.0	Mosquitoes/Flies Control (When Required) All chemical/treatment use must be approve by MOH.				
a	External Treatment External Fogging for external compound. External Spray for garden areas, drainage system, shrub, perimeter fencing or any other hiding or breeding areas. Apply larvicide for any potential breeding areas (stagnant water)	SERVICE		12	
b	Internal Treatment Space Treatment - using misting machine (ULV) or aerosol spray. Breeding Areas Treatment - apply larvicide, eg. potted plant.	SERVICE		12	
5.0	Snake (When Required) To apply Snake control repellent around the suspected snake infested building only. Sulfur flakes or sulfur powder to be applied at the immediate surroundings of the building, perimeter fencing is to be carried out to prevent snake entry from external sources.	Per treatment		20	
6.0	Termite prevention (When Required)				
a	Monthly preventive termite spraying at perimeter all UBD buildings and spraying at perimeter of all UBD buildings and spraying identified timber structures. Such as roof trusses, timber posts, timber skirtings etc.as in accordance to S.O approved method statement.	Per treatment		24	
b	Baiting and termination of termites infestation, soil treatment of affected area all in accordance after S.O approved method statement extermination.	Per location		24	
c	Baiting and termination of termites infestation, soil treatment of affected area all in accordance after S.O approved method statement extermination.	Mound		24	
Total Amount					

Validity Offer : 6 MONTHS (from the date of Quotation)

Defect Liability period: **N/A**

Liquidated and Ascertained Damages (LAD): **\$25.00 / day**

For each day the works remain incomplete (If none stated, then the Contract Administrator may certify a reasonable sum as compensation for delay).

Contract period :

12 MONTHS

Contract / Address:

(Official Chop / Signature)

.....
.....
.....

Tel. (off) _____
H/phone _____
Fax. No _____

Class / Category:

** Class : I and above

** Category: KPB 05