

**RINGKASAN SEBUTHARGA  
SUMMARY OF QUOTATION**

Tajuk / Title **SUPPLY AND INSTALL NEW FLOORING AT PRO-CHANCELLOR ARTS CENTRE, PCAC BUILDING, UNIVERSITI BRUNEI DARUSSALAM.**

Bil. Sebutharga **UBD/Q/101/2026 - [G]**

Quotation No.

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| Bil. No.             | Keterangan / Description   | Unit<br>Unit   | Kuantiti<br>Quantity | Kadar<br>Rate | Jumlah /Amount<br>(\$)<br>(€) |
|----------------------|--|----------------|----------------------|---------------|-------------------------------|
| 1                    | <p>Supply all necessary and appropriate labour, approved materials, proper and safe hand and/or powered tools and equipment including ladder and transportation (where necessary), for the proper, safe execution, completion and in accordance to the S.O's instructions and satisfaction, for the following scope of works (to remove/disconnect/demolish existing, fabricate, supply and install) or otherwise as stated below :</p> <p><b>FLOORING</b><br/> <b>Fresilient floor finish</b></p> <p>a. To supply and install <b>DECOFLEX - NEOFLEX SERIES</b> UNIVERSAL INDOOR RESILIENT FLOORING system;- consists of a <b>4mm thick</b> prefabricated rubber roll base mat bonded to the prepared sub-floor with a 2-component polyurethane (PU) adhesive.<br/>                     Top of the layer to be <b>DECOFLEX - Neoflex 800 series</b> 4mm thick prefabricated rubber roll with Factory finishingng coat. bonded to the base mate with a 2-component polyurethane (PU) adhesive.<br/>                     Note: Measurement is only the size of the room, not including vertical riser steps. Measuremnet should be done by the supplier them selves.</p> | m <sup>2</sup> | 374                  |               |                               |
| <b>TOTAL AMOUNT:</b> |  |                |                      |               |                               |

Validity Offer : **6 (six) months (from the date of quotation)**

Defect Liability period: **6 (six) months**

.....  
(Official Chop / Signature)

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  
**1 Month**

Contract / Address:

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

.....  
(Official Chop / Signature)

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

**\*\* Class : I and above**

**\*\* Category: B01**