

**RINGKASAN SEBUTHARGA
SUMMARY OF QUOTATION**

Tajuk / Title **SUPPLY SAFETY BOOTS FOR CAMPUS STAFF, UNIVERSITI BRUNEI DARUSSALAM**

Bil. Tawaran **UBD/Q/129/2026 - [G]**

Tender No.

Bil.	Keterangan / Description	Unit	Kadar	Kuantiti	Jumlah / Amount
No.		Unit	Rate	Quantity	(\$) (ø)
1	To supply safety shoes for CAMPUS Office. Safety shoes supplied must adhere to the following criteria: a) Fit. Wide fit design to accommodate a range of foot widths comfortably; available in standard and wide-fit sizing. b) Toe Protection. Lightweight composite (non-metallic) toe cap; Impact resistant to 200 joules and compression resistant to 15,000 N (EN ISO 20345 SB or S1P rated, or equivalent). c) Boot Height. Ankle-height (mid-cut) design for added support and protection. d) Outsole. Non-slip, oil resistant, and chemical-resistant rubber outsole; slip resistance tested to SRC (or equivalent) standard for use on wet and oily surfaces. e) Midsole. Anti-penetration midsole plate to protect against sharp objects underfoot (recommended for warehouse/field use). f) Upper Material Genuine leather or high durability breathable synthetic upper; water-resistant treatment. g) Lining. Breathable, moisture-wicking lining to reduce heat and moisture build-up. h) Weight. Lightweight construction- target under 600g per shoe to reduce fatigue.				
(PAGE 1) TOTAL AMOUNT:					
TOTAL AMOUNT:					

Bil.	Keterangan / Description	Unit	Kadar	Kuantiti	Jumlah / Amount
No.		Unit	Rate	Quantity	(\$)(€)
2	The supplied safety shoes shall be according to the sizes required below:				
	MENS SIZE:				
	EU Size 39	pairs		1	
	EU Size 40	pairs		2	
	EU Size 41	pairs		4	
	EU Size 41.5	pairs		1	
	EU Size 42	pairs		1	
	EU Size 42.5	pairs		3	
	EU Size 43	pairs		1	
	EU Size 44	pairs		3	
	EU Size 45	pairs		5	
	WOMENS SIZE:				
	EU Size 37.5	pairs		1	
	EU Size 38	pairs		1	
	EU Size 39	pairs		2	
(PAGE 1) TOTAL AMOUNT:					
(PAGE 2) TOTAL AMOUNT:					
TOTAL AMOUNT:					

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

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

.....
(Official Stamp / Signature)

Liquidated and Ascertained Damages (LAD): 25/day
For each day the works remain incomplete
Contract period : **2 MONTHS**

Contract / Address:

.....

.....

0-Jan-00

.....
(Official Stamp/ Signature)

Tel. (off)

H/phone

Fax. No