#### Form of Agreement

WHEREAS the Employer desires to engage the Contractor to Supply, Install Test, Train and Commission Anesthesia Machines for MNH\_Mloganzila Tender No. PA/009/2021-22/HQ/G/04 ("the Facilities") and the Contractor have agreed to such engagement upon and subject to the terms and conditions hereinafter appearing.

#### NOW IT IS HEREBY AGREED as follows:

## Article 1. Contract Documents

#### 1.1 Contract Documents

The following documents shall constitute the Contract between the Employer and the Contractor, and each shall be read and construed as an integral part of the Contract:

- (a) This form of Agreement
- (b) Special Conditions of Contract
- (c) General Conditions of Contract
- (d) Letter of Acceptance
- (e) Technical Specifications
- (f) Form of Tender and Price Schedules submitted by the Contractor
- (g) Power of Attorney

#### 1.2 Order of Precedence

In the event of any ambiguity or conflict between the Contract Documents listed above, the order of precedence shall be the order in which the Contract Documents are listed in Article 1.1 (Contract Documents) above.

#### 1.3 Definitions

Capitalized words and phrases used herein shall have the same meanings as are ascribed to them in the General Conditions of Contract.

#### Article 2. Contract

Price and Terms of Payment

#### 2.1 Contract Price

The Employer hereby agrees to pay to the Contractor the Contract Price in consideration of the performance by the Contractor of its obligations hereunder. The Contract Price shall be the aggregate of: Tshs 220,920,000.00 (Tanzanian Shillings Two Hundred Twenty Million Nine Hundred Twenty

Thousand Only) VAT Exclusive as per virtue of Item 14 of Part B of the Fifth Schedule to the East African Community Customs Management Act, 2004 and Item 7 of Part I of the exemption Schedule to the VAT Act, 2014) as specified in Price Schedule No. 5 (Grand Summary) or such other sums as may be determined in accordance with the terms and conditions of the Contract.

2.2 Terms of Payment

The terms and procedures of payment according to which the Employer will reimburse the Contractor are given in the corresponding Appendix (Terms and Procedures of Payment) hereto.

The Employer shall instruct its bank to issue an irrevocable confirmed documentary credit made available to the Contractor in a bank in the country of the Contractor. In the event that the amount payable under Schedule No. 1 is adjusted in accordance with GCC 11.2 or with any of the other terms of the Contract, the Employer shall arrange for the documentary credit to be amended accordingly.

# Article 3. Effective 3.1 Date for Determining Time for

Completion

3.1 Effective Date

The Time of Completion of the Facilities shall be determined from the date when all of the following conditions have been fulfilled:

- (a) This Contract Agreement has been duly executed for and on behalf of the Employer and the Contractor;
- (b) The Contractor has submitted to the Employer the performance security and the advance payment guarantee;
- (c) The Employer has paid the Contractor the advance payment
- (d) The Contractor has been advised that the documentary credit referred to in Article 2.2 above has been issued in its favor.

Each party shall use its best efforts to fulfil the above conditions for which it is responsible as soon as practicable.

3.2 If the conditions listed under 3.1 are not fulfilled within two (2) months from the date of this Contract notification because of reasons not attributable to the Contractor, the parties shall discuss and agree on an equitable adjustment to the Contract Price and the Time for Completion and/or other relevant conditions of the Contract.

### Article 4. Appendixes

- 4.1 The Appendixes listed in the attached List of Appendixes shall be deemed to form an integral part of this Contract Agreement.
- 4.2 Reference in the Contract to any Appendix shall mean the

Appendixes attached hereto, and the Contract shall be read and construed accordingly.

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IN WITNESS WHEREOF the Employer and the Contractor have caused this Agreement to be duly executed by their duly authorized representatives the day and year first above written.

EXECUTIVE DIRECTOR

For and on behalf of MUIHIMBILI NATIONAL HOSPITAL MLOGANZILA

Designation.

Signature P. O. Box 65000	
[Authorized Representative] DAR-ES-SALAAM	
Witness Veronica C. Hellar	
Qualification Hoad of legal Affairs Unit Signature & Stamp Defella LEGAL UNIT MUHIMBIL HATIONAL HOSPITAL  Date 09/08/2022 MUHIMBIL HATIONAL HOSPITAL  DATE	
DO POULA LEGAL UNIT HOSPITAL	
MUHIMBILI TO 65000 P. O. BOX 65000	
Date 07/01/2043	
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Designation Divector	
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and transmit	
Victor Mhoro Sicror Mhoro	
Warness Advocate (Strong Morning Marie) *	
Constitution (Street & Street & )	
Signature & Stamp	
10/08/2022 0000855	
Date	

#### THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH



### MUHIMBILI NATIONAL HOSPITAL

In reply please quote: Ref.No. MNH/CSO/TENDER/VOL IV/453/2022

Date: 04/08/2022

MANAGING DIRECTOR ANUDHA LIMITED, P.O Box 5982, DAR ES SALAAM, TANZANIA

## RE: NOTIFICATION OF AWARD OF CONTRACT FOR TENDER NO: PA/009/2021-22/HQ/G/04 FOR SUPPLY, INSTALL, TEST, TRAIN AND COMMISSION OF ANAESTHESIA MACHINES

This is to notify you that your Tender dated 03 August, 2022 for execution of Contract Tender No PA/009/2021-22/HQ/G/04 for Supply, Install, Test, Train and Commission of Anaesthesia Machines for the Accepted Contract Amount of the equivalent of Tshs 220,920,000.00 (Tanzanian Shillings Two Hundred Twenty Million Nine Hundred Twenty Thousand Only) VAT Exclusive as per virtue of Item 14 of Part B of the Fifth Schedule to the East African Community Customs Management Act, 2004 and Item 7 of Part I of the exemption Schedule to the VAT Act, 2014) as corrected and modified in accordance with the instructions to bidders is hereby accepted by us.

You are requested to furnish the Performance Security within 14 days in accordance with the Conditions of Contract, using for that purpose the Forms included in this Contract.

Please return the attached Con	ntract dully signed			
Authorized Signature:	Hal			- 1 97
Name and Title of Signatory:	Dr Hedmaa	trancy	tral	Ag Lo
Name of Client: MUHIMBILI N	NATIONAL HOSPITAL			

Attachment: Contract

Copy: PPRA, CAG, Office of Attorney General, GAMD, IAG, TRA