

AGREEMENT TO TERMS AND CONDITIONS**ITQ No: NKF/JT/2023/022****PROVISION OF CONSULTANCY SERVICES FOR INTERIOR DESIGN, ARCHITECTURAL, MECHANICAL & ELECTRICAL, STRUCTURAL & QUANTITY SURVEYING SERVICES INCLUDING PROJECT MANAGEMENT FOR PROPOSED ADDITIONS & ALTERATIONS WORK TO KIDNEY DIALYSIS CENTRE AT 1 PUNGGOL DRIVE #04-08 SINGAPORE 828629**

Please indicate clearly below your agreement to each clause of the Terms and Conditions. Where you are not in agreement, you should give your counter-proposal in the "Remarks" column or in a separate sheet to be attached to this form. Where you fail to expressly indicate disagreement against any clause, it shall be deemed that you agree to the same and the ITQ shall be evaluated accordingly.

Title of Document: **INVITATION-TO-QUOTE TERMS AND CONDITIONS**

| S/N | Heading of Clause | Please tick to confirm having read and agreed to the same | Remarks |
|-----|---|---|---------|
| 1 | Definitions | | |
| 2 | Introduction | | |
| 3 | Orders | | |
| 4 | Provision and Delivery | | |
| 5 | Inspection, testing and rejection | | |
| 6 | Prices | | |
| 7 | Payment | | |
| 8 | Guarantee | | |
| 9 | Indemnity | | |
| 10 | Limitation of Liability | | |
| 11 | Compliance with law, rules and regulations | | |
| 12 | Delay in delivery or performance | | |
| 13 | Remedies for intellectual property infringement | | |
| 14 | Drawings and technical documents | | |
| 15 | Confidentiality | | |
| 16 | Personal Data | | |
| 17 | Force Majeure | | |
| 18 | Termination | | |
| 19 | Notices | | |
| 20 | General | | |
| 21 | Information Security | | |

Title of Document: **INVITATION-TO-QUOTE TERMS AND CONDITIONS – Termination**

| S/N | Heading of Clause | Please tick to confirm having read and agreed | Remarks |
|-----|-------------------|---|---------|
| 1 | Clause 18.2 (b) | | |
| 2 | Clause 18.2 (c) | | |

Title of Document: **INVITATION-TO-QUOTE ADDITIONAL REQUIREMENTS – Annex C**

| S/N | Heading of Clause | Please tick to confirm having read and agreed | Remarks |
|-----|--------------------------|---|---------|
| 1 | Consumption of Goods | | |
| 2 | Non-performance of Goods | | |

Accepted By:

Authorized Signature: _____ Date: _____

Signatory Name: _____ Signatory Title: _____

Telephone Number: _____ Vendor's Name: _____

Email Address: _____ Vendor's Stamp: _____