

Order Form for the Provision of Goods and/or Services under the
Laboratory Diagnostics, Point of Care Testing and Pathology Managed Services
Contract Reference Number: **C342495**

For utilising the Direct route of supply

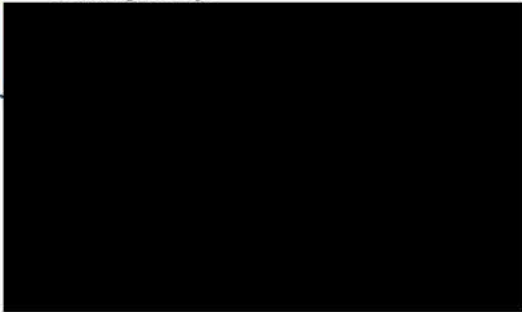
In accordance with appendix 3b Call off Terms for the Supply of Goods and Provisions of Services

Contract reference C342495

Note to Contracting Authorities: Optional clauses have been highlighted in yellow. Where optional clauses are not required, please mark the relevant fields as "not applicable".

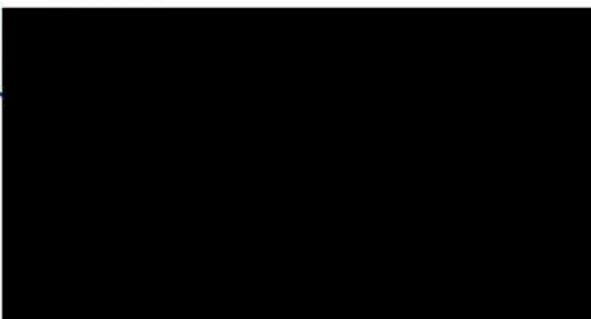
Signed by an authorised representative of the Authority

DocuSigned by:



Signed by an authorised representative of the Supplier

Signed by:



Key Provisions:**1. Contract Term**

Commencement Date:	This contract shall commence on the date of the last signature within this contract (the " Commencement date ")
Contract End Date:	The contract shall expire on 31 March 2025
Extension Option:	N/A

2. Contract Managers***For the Authority:***

Named Contract Manager:	[REDACTED]
Address for delivery of notices:	Commercial (Science), 10 South Colonnade, E14 4PU
Email address for delivery of notices:	[REDACTED]

For the Supplier:

Named Contract Manager:	[REDACTED]
Address for delivery of notices:	2san Global Ltd Unit 11, Oakwood Way, Carnforth Business Park Carnforth LA5 9FD (Company Number: 12620104)
Email address for delivery of notices:	[REDACTED]

3. Optional: Management Levels for Escalation and Dispute Resolution

Level	Authority Representative	Supplier Representative
1	[REDACTED]	[REDACTED]
2	[REDACTED]	[REDACTED]
3	[REDACTED]	[REDACTED]
4	[REDACTED]	[REDACTED]

Order Details:

Goods to be supplied are detailed as follows. **For the avoidance of doubt, all pricing is provided exclusive of VAT, inclusive of delivery and installation charges.**

MPC	Description	Unit of Purchase	Price (excl. VAT)	Quantity	Total price (excl. VAT)
ISIN-525H	Alltest Tri Multiplex LFD (ISIN-525H) - SARS-CoV-2 and Influenza A+B Antigen Combo Rapid Test(Nasal Swab)	1	██████ per unit	██████	Up to £74,000 subject to UKHSA requirement

Services to be supplied are detailed as follows. NOTE This section **must** be completed where Services are provided.

N/A

Delivery Address for Goods:

Goods provided following the receipt of this Order Form are to be supplied as follows.

All goods are to be supplied to the following address:	Wincanton, Rockingham way, Red House Interchange, Adwick le Street, Doncaster, DN6 7FB
Deliveries must be made on the following date(s) and time(s):	<p><i>Arrangements to be made with UKHSA Supply Chain and Logistics team.</i></p> <p><i>Asda Wincanton – Monday, Tuesday and Thursday 09:00 – 17:00</i></p> <p><i>Delivery and receipt by 31 March 2025</i></p>
Goods are to be delivered in the following quantities:	<p>██████ test kits to be delivered to Wincanton, Rockingham way, Red House Interchange, Adwick le Street, Doncaster, DN6 7FB</p> <p><i>All tests must be from same batch.</i></p>
Please note the following delivery instructions and access arrangements:	<p><i>Please detail; if not required, please state “not applicable”.</i></p> <p><i>All arrangements for deliveries to be discussed with UKHSA Supply chain and Logistics team.</i></p> <p><i>Booking form will be required for deliveries to Asda Wincanton</i></p>

	<p>Tests must be stored and transported within the temperature range as detailed in the stability studies. Temperature monitoring must be used throughout the full logistics arrangements. This may include but is not limited to:</p> <ul style="list-style-type: none"> • Transportation • Warehousing • Storage facilities
Timescale for goods to be inspected by the Authority within a reasonable time following deliver, and written notice of rejected goods to be provided	All arrangements for Goods inspection to be discussed with UKHSA Product, Supply chain and Logistics team.
<u>Optional</u> Details of items to be returned and collected:	Not Applicable

Payment Arrangements

Payments for goods to be made to the following address

Invoice address for payments:	<p>Post:</p> <p>United Kingdom Health Security Agency Financial Operations and Control Porton Down, Salisbury, Wiltshire SP4 0JG</p> <p>Email:</p> <p>[REDACTED]</p>
Special payment arrangements	<p>Payment of undisputed invoices will be made within 30 days of receipt of invoice, subject to the submission of an agreed Proof of Delivery (POD) which must be submitted promptly by the Supplier, and the completion of the Goods inspection.</p> <p>To avoid delay in payment it is important that the invoice is compliant and that it includes a valid PO Number (if provided), PO item number (if applicable) and the details (name and telephone number) of your Authority contact (i.e. Contract Manager). Non-compliant invoices will be sent back to you, which may lead to a delay in payment.</p> <p>If you have a query regarding an outstanding payment, please contact our Accounts Payable team by email to: payables@ukhsa.gov.uk</p>

OPTIONAL CLAUSES – All the following clauses are optional, please do not remove any clauses, but mark each as APPLICABLE or NOT APPLICABLE, as appropriate

Additional Obligations of the Supplier [APPLICABLE]

The supplier is subject to the following obligations, in addition to those detailed within the Framework Agreement, Tender Response Document, Framework Specification, and any Specification detailed within a Further Competition Process.

Performance standards

- Timely delivery of the Goods in accordance with the Delivery section of this Order form
- The Supplier shall deliver the Goods to the level of the Supplier's manufactured specifications as sold by the Supplier to the Authority.
- Delivery of goods within minimum 24 months shelf life upon delivery
- Conformance with Appendix 1 - Purchasing Specification
- Proof of delivery of the Goods to be supplied

Rights of Access [NOT APPLICABLE]

In order to carry out the services detailed in this Order Form, the Authority grants the following rights of use and access to the Supplier. For the avoidance of doubt any licence or lease entered into in accordance with this Order Form shall automatically and immediately terminate upon expiry or earlier termination of this Contract.

Please detail any rights of access being granted to the supplier in order for them to facilitate services required. This may include access to buildings, use of equipment, software or facilities. Start and end dates for any of these rights should be clearly stated, as well as any option to extend or vary these rights.

Implementation Plan/Key milestones [APPLICABLE].

Provision of the Goods is subject to the following milestones:

Milestone Description	Date of Implementation	Responsible Party
<i>Example: Handover process from incumbent supplier to be agreed</i>	<i>Example: Max. 12 weeks from the commencement date</i>	<i>Example: Supplier Name</i>
On time in Full delivery of the Goods to the delivery points subject to Proof of Delivery (POD)	As agreed with UKHSA Supply Chain and Logistics team	Supplier
Goods Inspection	As agreed with UKHSA Supply Chain and Logistics team	The Authority

Invoice payment	As stated within the Special Payment Arrangements section of this Order Form	The Authority
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Key Personnel [APPLICABLE]

The following staff are considered key to the delivery of the contract, any redeployment and/or replacement of such member of Staff by the Supplier shall be subject to the prior written approval of the Authority, such approval not to be unreasonably withheld or delayed.


Role Title	Role Description	Named Person

Key Performance Indicators [NOT APPLICABLE – Refer to Performance standards].

APPENDIX 1 – PRODUCT SPECIFICATION**DOCUMENT VERIFICATION**

Prior to using this document, the user is responsible for verifying that the revision and effective date are current.

REVISION HISTORY


Owning Organisation: UKHSA			Additional Organisation Using Document: 
Rev.	Effective Date	Change No	Changes Made to Document
1	22.05.2024		First Issue

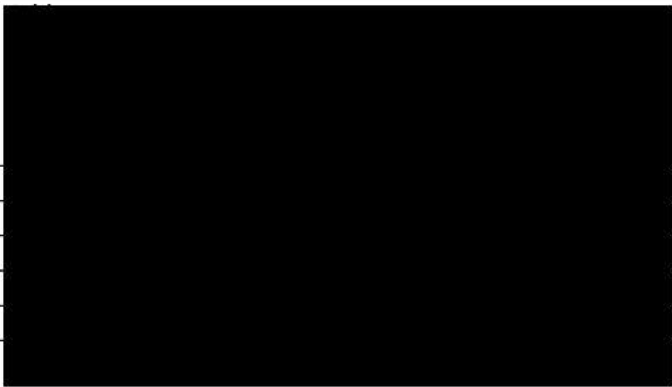
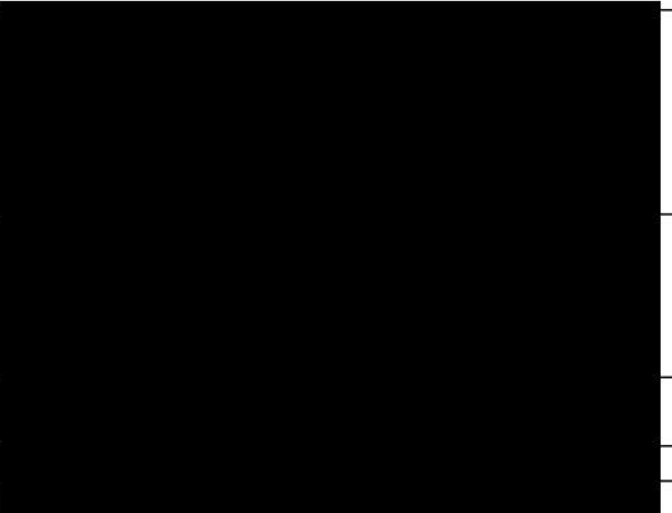
1. Contents

1. [Contents](#)
2. [Product Overview](#)
3. [Product/kit components](#)
4. [Product packaging](#)
5. [Digital solutions](#)

NB: All sections marked with an “*” to be completed after a contract is awarded and agreed post further discussions with the UKHSA.

2. Product Overview:

Supplier name:	Response:
Legal manufacturer name:	
Legal manufacturer location:	
Physical manufacturer name:	

Location of kit production:	
Product Name:	
Product Code:	
Product SKU:*	
Product description:	
Number of tests per box/kit:	
EAN barcode (on outer carton) number:	
EAN barcode (on outer carton) image:	
Information contained within the EAN barcode (on outer carton):	
Storage temperature:	
Shelf life:	
Time to interoperate results / mins:	

**** The product shall conform to the previously supplied details and images for ISIN-525H.**

DOCUMENT END