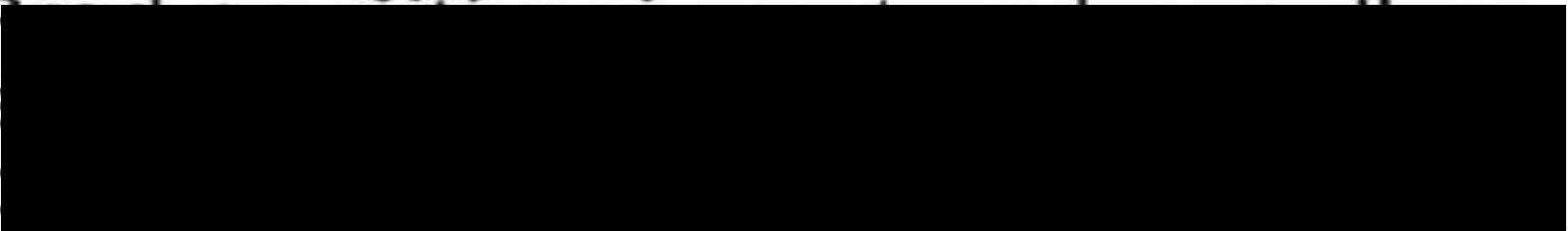
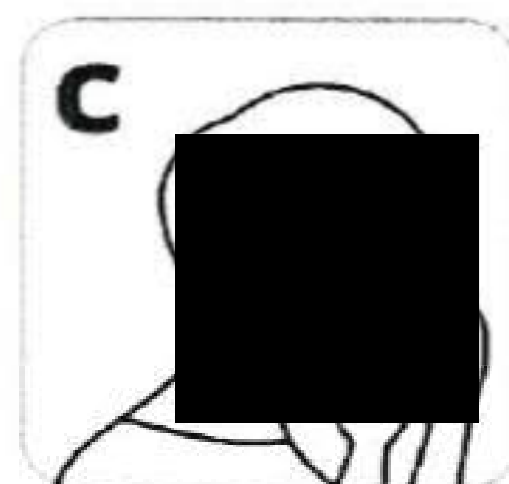
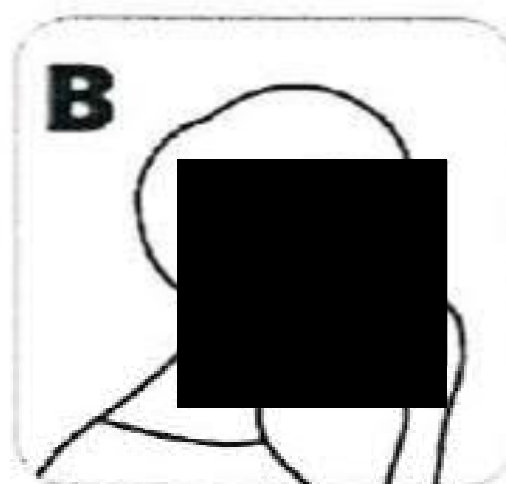
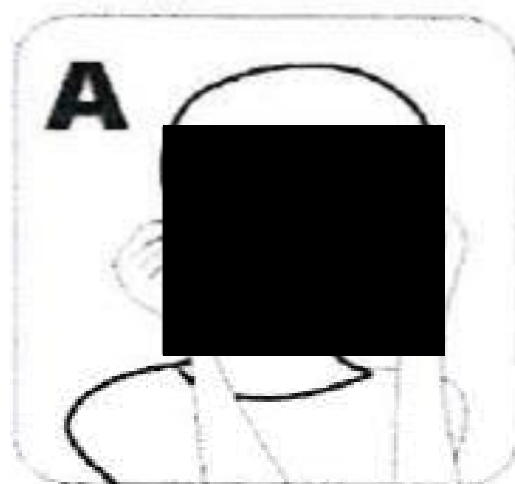


NÁVOD NA POUŽITIE:

1. 
2. 
3. Zaveďte pružné uchytý na obočej (vid' obr.A)
4. 
 (vid' obr.B)
5. 
(vid obr.C)



NÁVRH NA PLNENIE KRITÉRIA NA VYHODNOTENIE PONÚK A IDENTIFIKAČNÉ ÚDAJE UCHÁDZAČA

Obchodné meno uchádzača: ISPA Prešov, s. r. o.
Sídlo uchádzača: Sabinovská 1, 080 01 Prešov
IČO: 364 784 23
Meno a priezvisko štatutárneho zástupcu Ing. Rastislav Pavlovič - konateľ
IČ DPH: SK2021634175
Názov banky: UniCredit Bank Czech Republic and Slovakia
Číslo účtu (IBAN): 
Telefónne číslo: 
E-mailová adresa: ispa@kamenarstvoispa.sk

Predmet zákazky: „Ochranné jednorazové rúška“

Kritérium na vyhodnotenie ponúk:

najnižšia cena za celý predmet zákazky v EUR s DPH

Celková cena za predmet zákazky v EUR bez DPH	Výška DPH	Celková cena za predmet zákazky v EUR s DPH
Jednorazové rúška v množstve 50 000 ks s tvarujúcim pásikom, ploché, 3-vrstvové v súlade s opisom predmetu tejto výzvy 10 000,00	2 000,00	12 000,00

Cena uvedená uchádzačom obsahuje všetky náklady, ktoré uchádzačovi vzniknú v súvislosti s plnením predmetnej zákazky.

Som – ~~Nie som platiteľom DPH~~ (nehodiace sa preškrtnite)

Ak uchádzač nie je platiteľom DPH, na túto skutočnosť upozorní verejného obstarávateľa. Ak uchádzač nie je platcom DPH, ním uvedená cena bude považovaná za konečnú aj v prípade, ak by sa počas plnenia predmetu zákazky stal platiteľom DPH. V prípade, ak uchádzač je platiteľom DPH, avšak jeho sídlo je v inom členskom štáte EÚ alebo sídli mimo EÚ, uvedie v ponuke cenu, ktorá bude rozdelená na ním navrhovanú cenu bez DPH, výšku DPH a aj cenu s DPH podľa slovenských právnych predpisov (20%), aj keď samotnú DPH nebude v súlade s komunitárnym právom fakturovať.

V Prešove dňa 10.9.2020


.....
Ing. Rastislav Pavlovič

Technický list

JEDNORAZOVÉ TVÁROVÉ MASKY

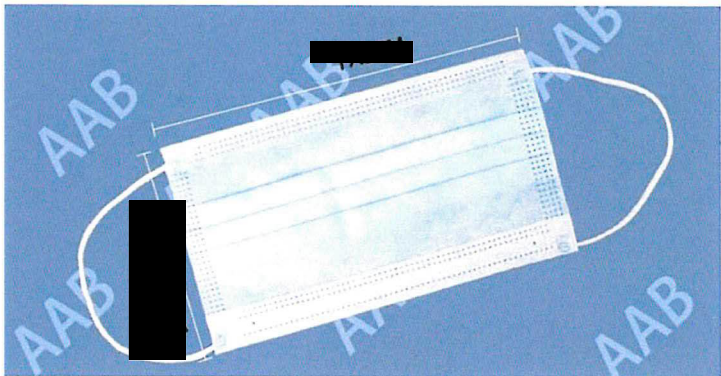
- Upevnenie na uši gumičkami
- Trojvrstvové masky
- účinnosť bakteriálnej filtrácie (BFE) vyššia ako 95%
- Formovateľná nosová spona
- Záruka: 2 roky

POUŽITIE

- v zdravotníctve
- mimo zdravotníctva
- na ochranu pred vírusmi a baktériami

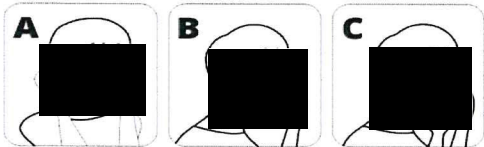
TECHNICKÉ ÚDAJE

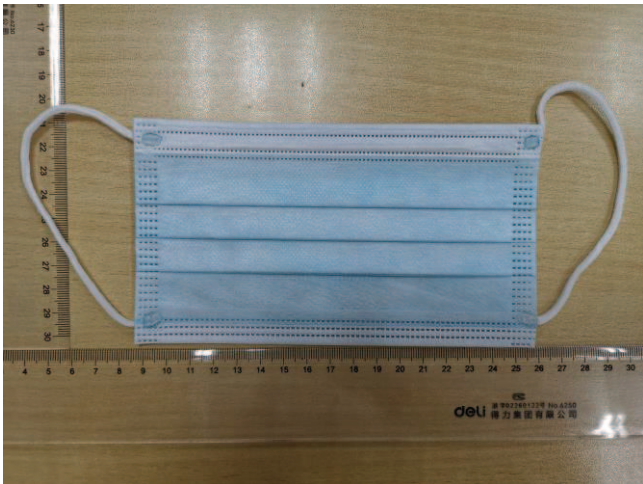
ZLOŽENIE	[REDACTED]	ilja
FARBA	[REDACTED]	
VEĽKOSŤ	[REDACTED]	
BALENIE	[REDACTED]	
VÝROBCA	[REDACTED]	



NÁVOD NA POUŽITIE:

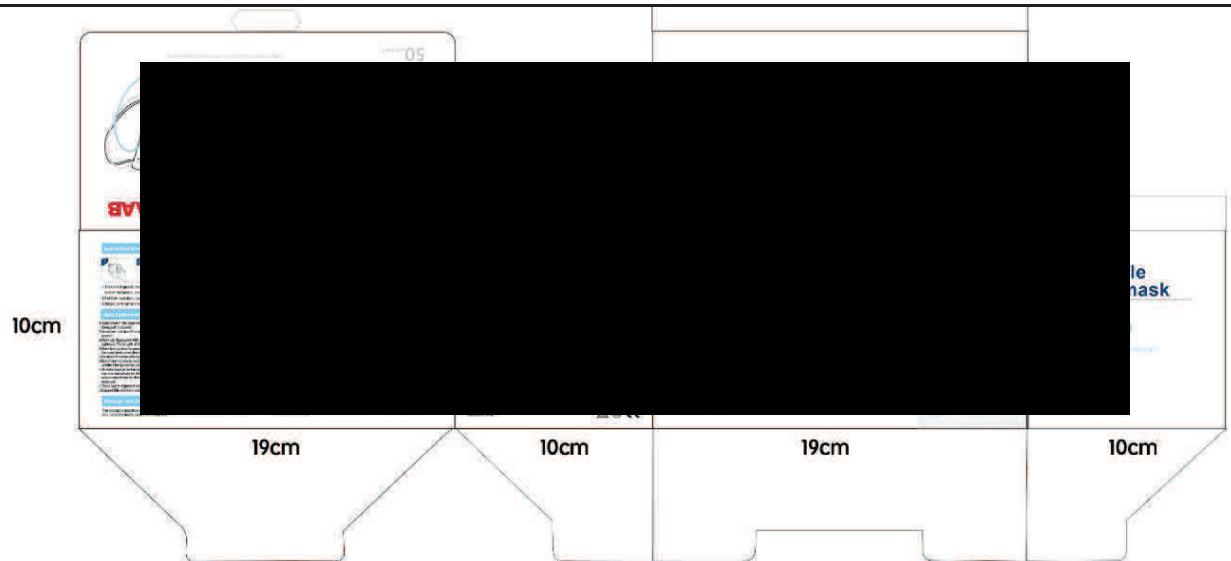
1. Pred použitím si umyte ruky mydlom.
2. Skontrolujte, či nie je súčka poškodená.
3. Z [REDACTED] (vid' obr.A)
4. Vytlačte horný okraj masky podľa tvaru vášho nosu (vid' obr.B)
5. Pootočte masku tak, aby ste ju mohli nosiť (vid' obr.C)



Prüfbericht-Nr.: <i>Test Report No.:</i>	██████████	Auftrags-Nr.: <i>Order No.:</i>	2██████████	Seite 1 von 14 Page 1 of 14
Kunden-Referenz-Nr.: <i>Client Reference No.:</i>	██████████	Auftragsdatum: <i>Order date:</i>	30.04.2020	
Auftraggeber: <i>Client:</i>	AAB (CHINA) CO., LTD. AAB Industrial Park, Honglai Town, Nan'an City, Fujian Province, China. 362000			
Prüfgegenstand: <i>Test item:</i>	Disposable medical mask			
Bezeichnung / Typ-Nr.: <i>Identification / Type No.:</i>	██████████			
Auftrags-Inhalt: <i>Order content:</i>	Type test			
Prüfgrundlage: <i>Test specification:</i>	EN 14683:2019+AC:2019 (except for Clause 5.2.6 Biocompatibility)			
Wareneingangsdatum: <i>Date of receipt:</i>	30.04.2020			
Prüfmuster-Nr.: <i>Test sample No.:</i>	A002819146-001			
Prüfzeitraum: <i>Testing period:</i>	06.05.2020 to 25.05.2020			
Ort der Prüfung: <i>Place of testing:</i>	See page 3			
Prüflaboratorium: <i>Testing laboratory:</i>	TÜV Rheinland (Shanghai) Co., Ltd.			
Prüfergebnis*: <i>Test result*:</i>	Pass			
geprüft von / tested by:		kontrolliert von / reviewed by:		
29.05.2020 Rainbow Pan/PE		29.05.2020 Xiaojun Ding/Review		
Datum <i>Date</i>	Name/Stellung <i>Name/Position</i>	Datum <i>Date</i>	Name/Stellung <i>Name/Position</i>	Unterschrift <i>Signature</i>
	██████████		██████████	██████████
Sonstiges / Other: The test report consists of EN 14683 test report including this cover page (14 pages). Clause 5.2.6 Biocompatibility is not evaluated in this report.				
Zustand des Prüfgegenstandes bei Anlieferung: <i>Condition of the test item at delivery:</i>		Prüfmuster vollständig und unbeschädigt <i>Test item complete and undamaged</i>		
* Legende: 1 = sehr gut 2 = gut 3 = befriedigend 4 = ausreichend 5 = mangelhaft P(ass) = entspricht o.g. Prüfgrundlage(n) F(ail) = entspricht nicht o.g. Prüfgrundlage(n) N/A = nicht anwendbar N/T = nicht getestet				
Legend: 1 = very good 2 = good 3 = satisfactory 4 = sufficient 5 = poor P(ass) = passed a.m. test specification(s) F(ail) = failed a.m. test specification(s) N/A = not applicable N/T = not tested				
Dieser Prüfbericht bezieht sich nur auf das o.g. Prüfmuster und darf ohne Genehmigung der Prüfstelle nicht auszugsweise vervielfältigt werden. Dieser Bericht berechtigt nicht zur Verwendung eines Prüfzeichens. <i>This test report only relates to the a. m. test sample. Without permission of the test center this test report is not permitted to be duplicated in extracts. This test report does not entitle to carry any test mark.</i>				

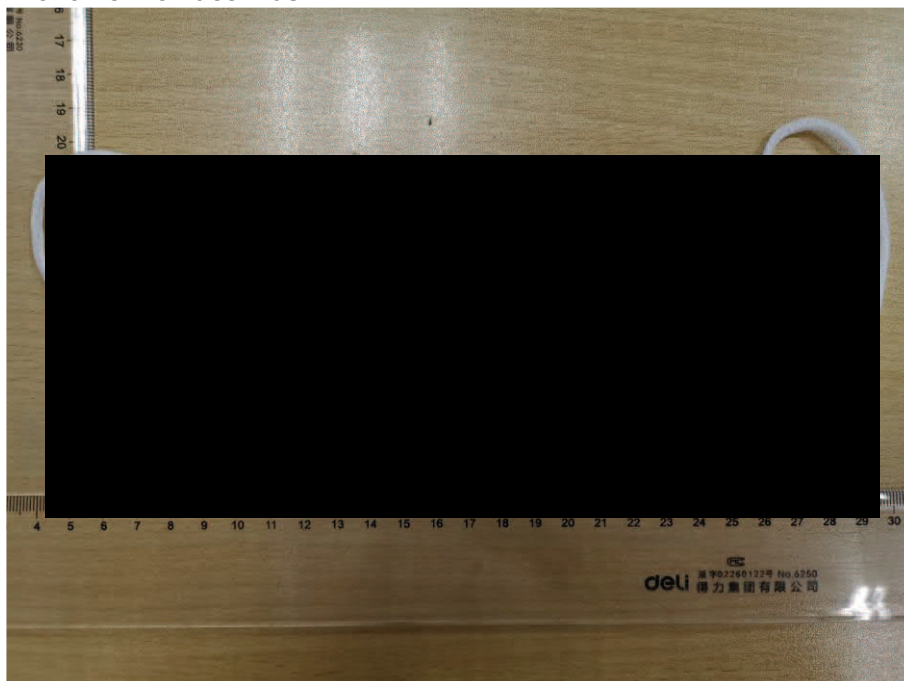
EN 14683:2019+AC: 2019 Medical face masks — Requirements and test methods	
Report Reference No. :	See cover page
Date of issue :	See cover page
Total number of pages :	See cover page
Testing Laboratory :	TÜV Rheinland (Shanghai) Co., Ltd.
Address :	No.177, 178, Lane 777 West Guangzhong Road, Jing'an District, Shanghai, China
Applicant's name	AAB (CHINA) CO., LTD.
Address :	AAB Industrial Park, Honglai Town, Nan'an City, Fujian Province, China. 362000
Test specification:	
Standard :	EN 14683:2019+AC:2019
Test procedure :	Type test
Non-standard test method:	N/A
Test Report Form No. :	EN 14683:2019+AC:2019_A
Test Report Form Originator :	TÜV Rh (SZ)
Master TRF :	2020-03
Test item description :	Disposable medical mask
Trade Mark :	AAB
Manufacturer	Same as applicant
Model/Type reference :	A002
Classification :	Type I

Copy of marking plate
The artwork below may be only a draft. The use of certification marks on a product must be authorized by the respective NCBs that own these marks.
Box:



Remark: According to information from applicant, there are 50pcs medical face masks including in final small package during mass production.

Front view of face mask:



Back view of face mask:



Open view of face mask:



Open view of face mask:



Testing
Date of receipt of test item(s): See cover page

Dates of tests performed: See cover page

Possible test case verdicts:

- test case does not apply to the test object : N/A
- test object does meet the requirement : P (Pass)
- test object was not evaluated for the requirement ... : N/E (collateral standards only)
- test object does not meet the requirement : F (Fail)

General remarks:

"(See Attachment #)" refers to additional information appended to the report.

"(See appended table)" refers to a table appended to the report.

The tests results presented in this report relate only to the object tested.

This report shall not be reproduced except in full without the written approval of the testing laboratory.

List of test equipment must be kept on file and available for review.

Additional test data and/or information provided in the attachments to this report.

Throughout this report a ☐ comma / ☒ point is used as the decimal separator.

Name and address of factory (ies): Same as applicant

General product information:

The submitted samples are type I, non-sterile disposable medical mask which is intended for patients and other persons to wear it in epidemic or pandemic situations. Covering the user's mouth, nose and jaw, filtering exhaling or spraying pollutants from the mouth and nasal cavity to reduce the risk of infection transmission.

Clause 5.2.6 Biocompatibility is not evaluated in this test report.

The test results are for reference only. Relevant certification may be needed if the mask is intended to be sold in Europe.

EN 14683:2019+AC:2019			
Clause	Requirement + Test	Result - Remark	Verdict
4	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
5.1.2	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
5.2.2	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]

Effective date: 2020-03-12

EN 14683:2019+AC:2019			
Clause	Requirement + Test	Result - Remark	Verdict
	b) [REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

5.2.2		TABLE: Bacterial filtration efficiency (BFE)						P
Batch/ lot no.:	Test Speci- men no.:	Dimension of the test specimen L x W (mm x mm)	test area (cm ²)	Flow rate (l/min)	Mean of the total plate counts of the two positive controls	Mean plate count of the negative controls	BFE for each test specimen (%)	Remarks
A00281 9146- 001								

Supplementary information:

1, Each specimen was conditioned at _____ °C and _____ % relative humidity for 4 h to bring them into equilibrium with atmosphere prior to testing.

2, The side of the test specimen was facing towards the challenge aerosol: __face__

Remark:

[illegible]

EN 14683:2019+AC:2019				
Clause	Requirement + Test		Result - Remark	Verdict
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
Supplementary information: Each specimen was conditioned at [REDACTED]°C and [REDACTED] % relative humidity for [REDACTED] h to bring them into equilibrium with atmosphere prior to testing. Remark: Limit value: Ty [REDACTED].				

5.2.4	TABLE: Splash resistance				N/A
Batch/ lot no.:	Test mask no.:	The material of tested mask	Test result (Pass/fail)	Remarks	
	1	[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	
		[REDACTED]	[REDACTED]	[REDACTED]	

Supplementary information:

- 1, Each specimen was conditioned at __°C and __ % relative humidity for __h to bring them into equilibrium with atmosphere prior to testing.
- 2, The description of target area tested:
- 3, Any technique used to enhance visual detection of synthetic blood:
- 4, The temperature and relative humidity for testing: __°C and __ %
- 5, Description of any pre-treatment techniques used:_____

Remark:

Limit value: not required for Type I and Type II;

Type IIR face mask should have splash resistance when splash resistance pressure _____ performed.

EN 14683:2019+AC:2019			
Clause	Requirement + Test	Result - Remark	Verdict

5.2.5	TABLE: Microbial cleanliness (Bioburden)				P
Batch/ lot no.:	Mask(under test) no.:	Weight of each mask (g)	Total bioburden per individual mask (CFU/g)	Remarks	
A002 XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	
	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	
	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	
	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	
	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	
	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	
Supplementary information: Remark: Limit value: Type I XXXXXXXXXX					

End of test report