

**Contact Number:** 

## **Quotation Advert**

Opening Date:	06/08/2018	12
Closing Date:	15/08/2018	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Itshelejuba hospital	<u>~</u> ]
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	ITSHELEJUBA HOSPITAL	
Date Submitted	03/08/2018	(*************************************
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: 130/18/19	
Item Category:	Services	<u>~</u>
Item Description:		
	CLEANING OF BUILDINGS & OFFICES AT ITSHELEJUBA HOSPITAL X 01 MONTH	
	NB: THOSE WHO ATTENDED BOTH SITE MEETINGS ON THE 20/07/20 B1/07/2018 NEEDS NOT TO ATTEND	18 &
Quantity (if supplies)		
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Compulsory Briefing Session	Y
Date :	08/08/2018	MICHES 1
Time:	09:00 AM .	
Venue:	ITSHELEJUBA HOSPITAL BOARDROOM	
QUOTES CAN BE COLLECTED FROM:	ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA & PIET RETIEF TOWN	
QUOTES SHOULD BE DELIVERED TO:	ITSHELEJUBA HOSPITAL - TENDER BOX AT MAIN SECURITY GATE	
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	SAMU MAPHISA	
Email:	camuladirina manhica@lanhaalth accen	

samukelisiwe.maphisa@kznhealth.gov.za



Finance Manager Signature:

No late quotes will be considered

034 413 408

Mr C. Nhleko

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