| | health |
|--------|----------------------------------------------|
| | Department: Health PROVINCE OF KWAZULU-NATAL |
| Openin | na Dato: |

Quotation Advert

| PROVINCE OF KWAZULU-NATAL | |
|------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Opening Date: | 29/08/2018 |
| Closing Date: | 04/09/2018 |
| Closing Time: | 11:00 |
| INSTITUTION DETAILS | |
| Institution Name: | Greytown hospital |
| Province: | KwaZulu-Natal |
| Department or Entity: | Department of Health |
| Division or section: | Central Supply Chain Management |
| Place where goods / services is required | Systems |
| Date Submitted | 27/08/2018 |
| ITEM CATEGORY AND DETAILS | |
| Quotation Number: | ZNQ: |
| | 21/08/2018 |
| Item Category: Item Description: | Goods |
| | |
| Quantity (if supplies) | 10 units |
| COMPULSORY BRIEFING SESSION / | SITE VISIT |
| Select Type: | Not Applicable |
| Date: | |
| Time: | |
| Venue: | |
| QUOTES CAN BE COLLECTED FROM: | Greytown Hospital (SCM) 7:30am to 16:00pm Weekdays |
| QUOTES SHOULD BE DELIVERED TO: | Gtn Hosp. Bell street ext, must be deposited in the tender box next to the main gate. or fax to 033 4132 809.No late or email quote will be accepted |
| ENQUIRIES REGARDING THE ADVER | T MAY BE DIRECTED TO: |
| Name: | Mr. S. Sosibo, Mr. S. Mzolo, Ms. N.T Mnyaka |
| Email: | siyabonga.mzolo@kznhealth.gov.za |
| Contact Number: | 033 4139 431 Ext:291 |
| Finance Manager Name: | Mr. R. Hannif |
| Finance Manager Signature: | P Much |

No late quotes will be considered