

**Contact Number:** 

## **Quotation Advert**

| PROVINCE OF KWAZULU-NATAL                | *   |                  |
|--|---|------------------|
| Opening Date:                            | 24/08/2018  | mex<br>313       |
| Closing Date:                            | 31/08/2018  | - 2004           |
| Closing Time:                            | 11:00   | 2.51             |
| INSTITUTION DETAILS                      |   |                  |
| Institution Name:                        | Mseleni hospital  | <b>&gt;</b>      |
| Province:                                | KwaZulu-Natal   |                  |
| Department or Entity:                    | Department of Health  |                  |
| Division or section:                     | Central Supply Chain Management   |                  |
| Place where goods / services is required | Mseleni Hospital  |                  |
| Date Submitted                           | 23/08/2018  | 369-X            |
| ITEM CATEGORY AND DETAILS                |   | 041              |
| Quotation Number:                        | ZNQ:<br>300/18/19-H   |                  |
| Item Category:                           | Goods   | V                |
| Item Description:                        | SUPPLY AND DELIVER DISPOSABLE SYRINGES SIZE 2ML, 5ML, 10ML A VE<br>20ML (BOX OF 100)  | )                |
|  |   |                  |
| Quantity (if assertion)                  |   |                  |
| Quantity (if supplies)                   | 900   |                  |
| COMPULSORY BRIEFING SESSION /            | SITE VISIT  |                  |
| Select Type: Date :                      | Not Applicable  | 1                |
|  |   | (18.0)<br>(19.1) |
| Time:                                    |   |                  |
| Venue:                                   |   |                  |
| QUOTES CAN BE COLLECTED FROM:            | MSELENI HOSPITAL (SCM DEPARTMENT)   |                  |
| QUOTES SHOULD BE DELIVERED TO:           | MSELENI HOSPITAL (HAND DELIVERY) NEXT TO SWITCHBOAR 2 OPERATO IN QUOTATION TENDER BOX | R                |
| ENQUIRIES REGARDING THE ADVER            | T MAY BE DIRECTED TO:   |                  |
| Name:                                    | NTOMBENHLE SOKHELE  |                  |
| Email:                                   | nto mbanbla cal asia @ was asiki.   |                  |

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