| health Department: Health PROVINCE OF KWAZULU-NATAL | Quotation Advert | |
|--|---|---------------------------------------|
| Opening Date: | 23/08/2018 | |
| Closing Date: | 04/09/2018 | |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Port Shepstone hospital | |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | PORT SHEPSTONE HOSPITAL | |
| Date Submitted | 23/08/2018 | |
| ITEM CATEGORY AND DETAILS | 25.30.20.10 | |
| Quotation Number: | ZNQ: | |
| | PSH691/1819 | |
| Item Category: | Goods | |
| Item Description: | CATHETER CLOSED SUCTION SYSTEM FOR VENTILATED PATIENTS SIZE: 14FR X 4.6MM X 30.5CM | |
| | | |
| | 100 UNITS | |
| COMPULSORY BRIEFING SESSION / | SITE VISIT | |
| COMPULSORY BRIEFING SESSION / Select Type: | | |
| COMPULSORY BRIEFING SESSION / Select Type: Date: | SITE VISIT | |
| COMPULSORY BRIEFING SESSION / Select Type: Date: Time: | SITE VISIT | |
| Date : Time: | SITE VISIT | |
| COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue: | SITE VISIT | |
| COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue: QUOTES CAN BE COLLECTED FROM: | SITE VISIT Select PORT SHEPSTONE HOSPITAL | ÷ |
| COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: | SITE VISIT Select PORT SHEPSTONE HOSPITAL NO.7 BAZLEY STREET PORT SHEPSTONE HOSPITAL NO.7 BAZLEY STREET | • • • • • • • • • • • • • • • • • • • |
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| COMPULSORY BRIEFING SESSION / Select Type: Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER | SITE VISIT Select PORT SHEPSTONE HOSPITAL NO.7 BAZLEY STREET PORT SHEPSTONE HOSPITAL NO.7 BAZLEY STREET T MAY BE DIRECTED TO: P. G. MSELEKU | |
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| COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER Name: Email: Contact Number: | SITE VISIT Select PORT SHEPSTONE HOSPITAL NO.7 BAZLEY STREET PORT SHEPSTONE HOSPITAL NO.7 BAZLEY STREET T MAY BE DIRECTED TO: P. G. MSELEKU surendra.premnadu@kznhealth.gov.za 039-688 6241 | • |
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