

## Quotation Advert

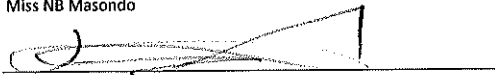
<b>Opening Date:</b>	10/12/2018	<input type="checkbox"/>
<b>Closing Date:</b>	18/12/2018	<input type="checkbox"/>
<b>Closing Time:</b>	11:00	
<b>INSTITUTION DETAILS</b>		
<b>Institution Name:</b>	Hlabisa hospital	<input checked="" type="checkbox"/>
<b>Province:</b>	KwaZulu-Natal	
<b>Department or Entity:</b>	Department of Health	
<b>Division or section:</b>	Central Supply Chain Management	
<b>Place where goods / services is required</b>	Hlabisa hospital	
<b>Date Submitted</b>	07/12/2018	<input type="checkbox"/>
<b>ITEM CATEGORY AND DETAILS</b>		
<b>Quotation Number:</b>	ZNQ: 533-18/19	
<b>Item Category:</b>	Services	<input checked="" type="checkbox"/>
<b>Item Description:</b>	Major service for Ventilation	
<b>Quantity (if supplies)</b>	06	
<b>COMPULSORY BRIEFING SESSION / SITE VISIT</b>		
<b>Select Type:</b>	Not Applicable	<input checked="" type="checkbox"/>
<b>Date :</b>		<input type="checkbox"/>
<b>Time:</b>		
<b>Venue:</b>		
<b>QUOTES CAN BE COLLECTED FROM:</b>	60 Saunders street Hlabisa hospital SCM Office	
<b>QUOTES SHOULD BE DELIVERED TO:</b>	60 Saunders street hlabisa hospital maingate tenderbox	
<b>ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:</b>		
<b>Name:</b>	Mr AN Sithole	
<b>Email:</b>	ayanda.sithole@kznhealth.gov.za	
<b>Contact Number:</b>		

035 838 8625/8776/8780






**Finance Manager Name:**

Miss NB Masondo

**Finance Manager Signature:**

A handwritten signature in black ink, appearing to be 'NB Masondo', written over a horizontal line.

**No late quotes will be considered**

 Submit  Save  Save As...  Close  Print Preview

Print this page

**Note:**

The completed Quotation Advert must be printed and signed by the Finance manager