




## Quotation Advert

**Opening Date:** 05/12/2018   
**Closing Date:** 12/12/2018   
**Closing Time:** 11:00

### INSTITUTION DETAILS

**Institution Name:** Ngwelezane hospital   
**Province:** KwaZulu-Natal  
**Department or Entity:** Department of Health  
**Division or section:** Central Supply Chain Management  
**Place where goods / services is required** NGWELEZANA HOSPITAL, THANDUYISE RD, EMPANGENI 3880  
**Date Submitted** 04/12/2018 



### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
A284/18-19  
**Item Category:** Goods 

**Item Description:** REQUISITION FOR SHELIVING OF OUTPATIENT FILLING CARD/ THE AREA FOR FITTING SHELVES IS 15 M,600 MMX8M, 400MM THE HOLE SQUEMETER IS 48 M PLAN

**Quantity (if supplies)** 01 UNIT

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Compulsory Site Visit   
**Date :** 07/12/2018   
**Time:** 12:30  
**Venue:** NGWELEZANE HOSPITAL SCM DEPT (STORES)

**QUOTES CAN BE COLLECTED FROM:** NGWELEZANE HOSPITAL, (STORES) SCM DEPT

**QUOTES SHOULD BE DELIVERED TO:** NGWELEZANE HOSPITAL TENDER BOX NEXT TO OPD

### ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

**Name:** N.S MNGOMEZULU/R.T MKHUMBUZI  
**Email:** nomathandazo.mngomezulu@kznhealth.gov.za  
**Contact Number:**

035 901 7228/7180

**Finance Manager Name:**





MR S.E NGWENYA

**Finance Manager Signature:**



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**No late quotes will be considered**

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Note: