

Opening Date: 31/07/2018
Closing Date: 03/08/2018
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 TB Hospital (M3)
Date Submitted 30/07/2018

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
60/07/2018
Item Category: Goods
Item Description: Supply and deliver Heamoglobin testing system set

Quantity (if supplies) 04 Sets

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable
Date :
Time:
Venue:

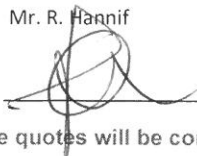
QUOTES CAN BE COLLECTED FROM: Greytown Hospital (SCM) 7:30am to 16:00pm Weekdays

QUOTES SHOULD BE DELIVERED TO: Greytown Hosp. Bell street Ext, deposit in a tender box next to the main gate or fax to 033 4132 809. No late or emailed quote will be accepted.

ENQUIRIES REGARDING THE ADVERT 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:



No late quotes will be considered