

## Quotation Advert

**Opening Date:** 29/06/2018

**Closing Date:** 06/07/2018

**Closing Time:** 11:00

### INSTITUTION DETAILS

**Institution Name:** St Chads CHC

**Province:** KwaZulu-Natal

**Department or Entity:** Department of Health

**Division or section:** Central Supply Chain Management

**Place where goods / services is required** ST. CHADS CHC CNR OF HELPMEKAAR AND EZAKHENI MAIN...

**Date Submitted** 28/06/2018

### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
ZNQ 31/18-19 MNT

**Item Category:** Services

**Item Description:** SERVICE OF ALL AIRCONDITIONERS FOR 9 (NINE) CLINICS AND ST. CHADS  
  
N.B ONLY SPECIALISED COMPANIES FOR THIS KIND OF SERVICE ARE  
REQUIRED TO QUOTE

**Quantity (if supplies)** QTY= 57 SPIT UNITS

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not Applicable

**Date :** N/A

**Time:** N/A

**Venue:** N/A

**QUOTES CAN BE COLLECTED FROM:** ST. CHADS CHC CNR OF HELPMEKAAR AND EZAKHENI MAIN ROAD, LADYSMITH 3380 ^  
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**QUOTES SHOULD BE DELIVERED TO:** TO BE DEPOSITED AT THE TENDER BOX NEXT TO THE SECURITY MAIN GATE, ST. CHADS CHC CNR OF HELPMEKAAR AND EZAKHENI MAIN ^  
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## **ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:**

**Name:**

MRS S.Z.L. MKHIZE OR MRS A. SOMARU

**Email:**

zoe.mkhize@kznhealth.gov.za OR annaline.somaru@kznhealth.gov.za

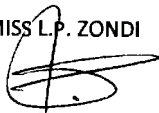
**Contact Number:**

036 637 9600 EXT.140,128,139

**Finance Manager Name:**

MISS L.P. ZONDI

**Finance Manager Signature:**

A handwritten signature in black ink, appearing to be 'L.P. Zondi', written over a horizontal line.

**No late quotes will be considered**