

## Quotation Advert

Opening Date:	01/10/2018	4
Closing Date:	11/10/2018	7
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Umkhanyakude district office	
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	UMKHANYAKUDE SUB-HEALTH DISTRICT OFFICE, NEXT BOXE	1
Date Submitted	28/09/2018	1
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: ZNQ 055/18/19-UMKH	
Item Category:	Services	
Item Description:	SERVICE OF AIRCONDITIONERS X 53	
	COMPANIES MUST HAVE CIDB CERTIFICATE MINIMUM 1ME, LETTER OF GOOD STANDING WITH COMPANSATION COMMISSION (DERPATMENT OF LABOUR), SARACA AND GAS CERTIFICATE, AND REGISTERED WITH CSD	
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Quantity (if supplies)		
COMPULSORY BRIEFING SESSION / S	SITE VISIT	
Select Type:	Not Applicable	
Date :		100 100 100 100 100 100 100 100 100 100
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	UMKHANYAKUDE SUB-HEALTH DISTRICT OFFICE, NEXT TO BOXER	
QUOTES SHOULD BE DELIVERED TO:	UMKHANYAKUDE SUB-HEALTH DISTRICT OFFICE, NEXT TO BOXER STORE	
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	NONTOBEKO MSANE	
Email:	nontobeko.msane@kznhealth.gov.za	
Contact Number:	035 572 1042	
Finance Manager Name:	MRS B. MTHEMBU	
Finance Manager Signature:	Em	

No late quotes will be considered