

## **Quotation Advert**

| Opening Date:                                      | 18/10/2018   |
|--|--|
| Closing Date:                                      | 31/10/2018   |
| Closing Time:                                      | 11:00  |
| INSTITUTION DETAILS                                |  |
| Institution Name:                                  | Gamalakhe CHC  |
| Province:  | KwaZulu-Natal  |
| Department or Entity:                              | Department of Health   |
| Division or section:                               | Central Supply Chain Management  |
| Place where goods / services is required           | Gamalakhe CHC  |
| Date Submitted                                     | 17/10/2018   |
| ITEM CATEGORY AND DETAILS                          |  |
| Quotation Number:                                  | ZNQ:<br>GCHC117/1819   |
| Item Category:                                     | Services   |
| Item Description:                                  | Supply and install Water tank for Shelly Beach Clinic  |
| Quantity (if supplies)                             | 1 UNIT   |
| COMPULSORY BRIEFING SESSION                        | Tananda and the state of the st |
| Select Type:                                       | Compulsory Briefing Session  |
| Date :   | 25/10/2018   |
| Time:  | 11100  |
| Venue:   | SHELLY BEACH CLINIC  |
|  |  |
| QUOTES CAN BE COLLECTED FROM:                      | Shelly Beach clinic - during site inspection   |
| QUOTES SHOULD BE DELIVERED TO:                     | Off Ray Nkonyeni Road Corner Micheal Nsimbi & Rev Sithole Road<br>Gamalakhe - TENDER BOX   |
| ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: |  |
| Name:  | Mr P Ngubo   |
| Email:   | mbaìi,fani@kznhealth.gov.za  |
| Contact Number:                                    | 039 318 1113   |
| Finance Manager Name:                              | Mrs. BP Mthembu  |
|  | (APG)  |

Finance Manager Signature: