

## Quotation Advert

**Opening Date:** 02/11/2018

**Closing Date:** 09/11/2018

**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

**Date Submitted** 31/10/2018

### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
175/18-19 ST

**Item Category:** Goods

**Item Description:** MICROWAVE OVEN  
300 WATTS  
220 VOLTS  
CONVECTION MICROWAVE

**Quantity (if supplies)** 03 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 SCM OFFICE, CRN HELPMEKAR QAND EZAKHENI MAIN ROAD ^

**QUOTES SHOULD BE DELIVERED TO:** TO BE DEPOSITED TO THE TENDER BOX AT ST CHADS CHC SECURITY MAIN GATE v

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

**Name:** MRS SZL MKHIZE OR MRS A SOMARU  
**Email:** zoe.mkhize@kznhealth.gov.za OR annaline.somaru@kznhealth.gov.za  
**Contact Number:** 036 637 9600 ext 128, 139, 140  
**Finance Manager Name:** MISS L.P. ZONDI  
**Finance Manager Signature:** 

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**No late quotes will be considered**