health **Quotation Advert** Department **Opening Date:** 25/10/2018 **Closing Date:** 02/11/2018 Closing Time: 11:00 **INSTITUTION DETAILS** Institution Name: Port Shepstone hospital Province: KwaZulu-Natal Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required PORT SHEPSTONE HOSPITAL **Date Submitted** 25/10/2018 ITEM CATEGORY AND DETAILS **Quotation Number:** ZNQ: PSH 976-1819 Item Category: Goods Item Description: **ULTRASONIC SCALER** Quantity (if supplies) COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Not Applicable Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: NO 7 BAZLEY STREE PORT SHEPSTONE HOSPITAL **QUOTES SHOULD BE DELIVERED TO:** NO 7 BAZLEY STREET PORT SHEPSTONE HOSPITAL ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: Name: MISS B.A NCANE Email: surendra.premnadu@kznhealth.gov.za **Contact Number:** 039-688 6129 / 6248 Finance Manager Name: MR. NSB RADEBE

No late quotes will be considered

Finance Manager Signature: