

## Quotation Advert

**Opening Date:** 31/10/2018

**Closing Date:** 07/11/2018

**Closing Time:** 11:00

### INSTITUTION DETAILS

**Institution Name:** Ngwelezane hospital

**Province:** KwaZulu-Natal

**Department or Entity:** Department of Health

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

**Place where goods / services is required** STORES DEPT NGWELEZANA HOSPITAL THANDUYISE ROAD E

**Date Submitted** 30/10/2018

### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
A232/17-18

**Item Category:** Goods

**Item Description:** TRANSPORT VENTILATOR ADULT AND PAEDS

**Quantity (if supplies)** 02 UNITS

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not Applicable

**Date :**

**Time:**

**Venue:**

**QUOTES CAN BE COLLECTED FROM:** SCM DEPT NGWELEZANA HOSPITAL THANDUYISE ROAD

**QUOTES SHOULD BE DELIVERED TO:** THANDUYISE ROAD SCM DEPT TENDER BOX NEXT TO OPD

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

**Name:** NS MNGOMEZULU/ RT MKHUMBUZI

**Email:** nomathandazo.mngomezulu@kznhealth.gov.za

**Contact Number:**

035 901 7228/7180

**Finance Manager Name:**

Mr SE NGWENYA

**Finance Manager Signature:**



No late quotes will be considered

Submit Save Save As... Close Print Preview

Print this page

ote:

1. The completed Quotation Advert must be printed and signed by the Finance manager