



# Quotation Advert

**Opening Date:**

**Closing Date:**

**Closing Time:**

## INSTITUTION DETAILS

**Institution Name:**

**Province:**

**Department or Entity:**

**Division or section:**

**Place where goods / services is required**

**Date Submitted**

## ITEM CATEGORY AND DETAILS

**Quotation Number:**

**Item Category:**

**Item Description:**

**Quantity (if supplies)**

## COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:**

**Date :**

**Time:**

**Venue:**

**QUOTES CAN BE COLLECTED FROM:**

**QUOTES SHOULD BE DELIVERED TO:**

## ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

**Name:**

**Email:**

**Contact Number:**

**Finance Manager Name:**




035 901 7228

MR S.E NGWENYA

**Finance Manager Signature:**



**No late quotes will be considered**

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