



Quotation Advert

Opening Date: 24/10/2018

Closing Date: 31/10/2018

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: NGWELEZANE HOSPITAL, THANDUYISERD, EMPANGENI

Date Submitted: 23/10/2018

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: B405/18-19

Item Category: Goods

Item Description: HEAMOGLOBIN TESTING MACHINE

Quantity (if supplies): 04 UNIT

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: NGWELEZANE HOSPITAL SCM DEPT

QUOTES SHOULD BE DELIVERED TO: NGWELEZANE HOSPITAL TENDER BOX NEXT TO OPD

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: N.S MNGOMEZULU/R.T MKHUMBUZI

Email: omathandazo.mngomezulu@kznhealth.gov.za

Contact Number:

Finance Manager Name:



035 901 7228

Finance Manager Signature:

MR S.E NGWENYA



No late quotes will be considered

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