

Contact Number:

Quotation Advert

PROVINCE OF KWAZULU-MATAL	• • • • • • • • • • • • • • • • • • • •	
Opening Date:	03/10/2018	
Closing Date:	10/10/2018	230
Closing Time:	11:00	latial
INSTITUTION DETAILS		
Institution Name:	Ngwelezane hospital	\square
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	NGWELEZANA HOSPITAL, THANDUYISE ROAD EMPANO	3ENI 38(
Date Submitted	02/10/2018	(10)
ITEM CATEGORY AND DETAILS		*: *19
Quotation Number:	ZNQ: B657/18-19	
Item Category:	Goods	$\mathbf{\nabla}$
Item Description:	SUBDERMAL NEEDLES 13MM	
Quantity (if supplies)	15 BOXES OF 100	
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Not Applicable	$oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol{ol}}}}}}}}}}}}}}}$
Date:		170
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	NGWELEZANA HOSPITAL SCM DEPT	
QUOTES SHOULD BE DELIVERED TO:	WELEZANA HOSPITAL TENDER BOX NEXT TO OPD	
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	N.S MNGOMEZULU/R.T MKHUMBUZI	
Email:	nomathandazo.mngomezulu@kznhealth.gov.za	

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Finance Manager Name:	Mr SE Ngwenya	
Finance Manager Signature:	Steven	
	No late quotes will be considered	
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1. The completed Quotation Advert must be printed and signed by the Finance manager.