

**Contact Number:** 

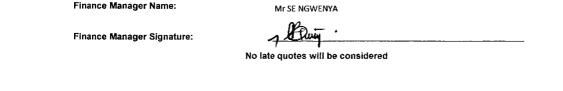
## **Quotation Advert**

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Opening Date:	03/10/2018	
Closing Date:	10/10/2018	2,7,00 2,7,00 2,7,00
Closing Time:	11:00	12122
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	NGWELEZANA HOSPITAL, THANDUYISE ROAD EMPANGI	ENI 381
Date Submitted	02/10/2018	[i.e]
ITEM CATEGORY AND DETAILS		*25(3)
Quotation Number:	ZNQ: M1100/18-19	
Item Category:	Services	$\nabla$
Item Description:	SUPPLY US WITH CUPBOARD FIXING AND REPAIRING MATERIAL	
Quantity (if supplies)	LIST ATTACHED	
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Not Applicable	$\geq$
Date:		100 m
Time:	- -	
Venue:		
QUOTES CAN BE COLLECTED FROM:	NGWELEZANA HOSPITAL, THANDUYISE ROAD SCM DEPT	
QUOTES SHOULD BE DELIVERED TO:	THANDUYISE ROAD SCM DEPT TENDER BOX NEXT TO OPD	
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	NS MNGOMEZULU/RT MKHUMBUZI	
Email:	nomathandazo.mngomezulu@kznhealth.gov.za	

Submit Save Save As... Close Print Preview

The completed Outstation Advant must be printed and signed by the Finance manages

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