

Email:

**Contact Number:** 

## **Quotation Advert**

PROVINCE OF KWAZURU-HATAL		
Opening Date:	03/10/2018	17.6
Closing Date:	10/10/2018	
Closing Time:	11:00	
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	STORES DEPT NGWELEZANA HOSPITAL THANDUYISE R	ROAD E
Date Submitted	02/10/2018	10
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: M54/18-19	
Item Category:	Services	~
Item Description:	SERVICE TO KITCHEN FREEZER	
Quantity (if supplies)	01 UNIT	
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Not Applicable	¥
Date :		X10000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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 ADVE	RT MAY BE DIRECTED TO:	
Name:	N S MNGOMEZULU/ R T MKHUMBUZI	

nomathandazo.mgomezulu@kznhealth.gov.za

035 901 7228/7180

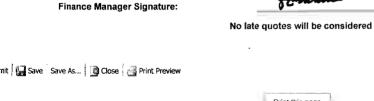
Mr S E NGWENYA

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y Chain Management - AdvertQuote

Finance Manager Name:

Pag



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