

Email:

Contact Number:

Quotation Advert

| Health PROVINCE OF KWAZULU-NATAL | Quotation Auvert | |
|---|---|------------------------------------|
| Opening Date: | 20/09/2018 | 7000000N |
| Closing Date: | 25/09/2018 | 90000000 1 |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Christ the King hospital | $[\mathbf{y}]$ |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | CHRIST THE KING HOSPITAL | |
| Date Submitted | 19/09/2018 | g0000000 1 1 2 3 3 2 1 2 3 3 |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: 200/2018/19 | |
| Item Category: | Goods | <u> </u> |
| Item Description: | SUPPLY AND DELIVER ELECTRIC URNS | |
| | | |
| | | |
| Quantity (if supplies) | | |
| | ON / SITE VISIT | |
| COMPULSORY BRIEFING SESSIC |)N / SITE VISIT Not Applicable | ⊻ |
| | | <u>✓</u> |
| COMPULSORY BRIEFING SESSIC Select Type: | | |
| COMPULSORY BRIEFING SESSIC Select Type: Date : | | |
| COMPULSORY BRIEFING SESSIC Select Type: Date: Time: | | |
| COMPULSORY BRIEFING SESSIC Select Type: Date: Time: | | |
| COMPULSORY BRIEFING SESSIC Select Type: Date : Time: Venue: | Not Applicable | |
| COMPULSORY BRIEFING SESSIC Select Type: Date : Time: Venue: QUOTES CAN BE COLLECTED FROM: | Not Applicable CHRIST THE KING HOSPITAL 1 PETER HAUFF DRIVE, IXOPO,3276 | |

scm.ctk@kznhealth.go.za

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Finance Manager Name:

No late quotes will be considered

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N.B. SIMELANE

Print this page

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