

Contact Number:

Quotation Advert

| Health PROVINCE OF KWAZULU-NATAL | | |
|--|--|-------------------------|
| Opening Date: | 19/09/2018 | |
| Closing Date: | 26/09/2018 | |
| 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 | THANDUYISE RD, NGWELEZANA T/SHIP EMPANGENI | and a |
| Date Submitted | 18/09/2018 | 挪 |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: A992/18-19 | į |
| Item Category: | Goods | \vee |
| Item Description: | 1 | 1 |
| | PERCUTANEOUS ENDOSCOPIC GASTROSTOMY - 24FR GASTROSTOMY TUBE, CATHETER IS MAGNETIC RESONANCE SAFE, CONTAINS GRADE SILICONE TUBE BOLTERS, CURVED HEMOSTAT, SURGICAL SCALPEL, GAPADS PRECUTDRAINAGE SPONGES, TROCAR CANNULA SHEL DINGER NEEDLE, SCISSORS, INSERTION WIRE, C-CLAMP, Y-PORT AND 1.9MM RETRIEVAL SNARE | AUZE |
| | | 1 |
| Quantity (if supplies) | 05 UNITS | |
| COMPULSORY BRIEFING SESSION / SITE VISIT | | |
| Select Type: | Select | $\overline{\mathbf{v}}$ |
| Date: | | Ö |
| Time: | | |
| Venue: | | 1 |
| | | ! |
| QUOTES CAN BE COLLECTED FROM: | SUPPLY CHAIN MANAGEMENT(STORES) | 1 |
| QUOTES SHOULD BE DELIVERED TO: | NGWELEZANA HOSPITAL TENDER BOX IN OPD DEPARTMENT | |
| ENQUIRIES REGARDING THE ADVERT | MAY BE DIRECTED TO: | |
| Name: | NS MNGOMEZULU/ RT MKHUMBUZI | |
| Email: | spbiyela@gmail.com/ nomathandazo.mngomezulu@kznhealth.gov.za | , , |

Finance Manager Name:

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Finance Manager Signature:

No late quotes will be considered

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S.E Ngwenya

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

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