






Quotation Advert

Opening Date: 2019-04-25 
Closing Date: 2019-05-13 
Closing Time: 11:00

INSTITUTION DETAILS



Institution Name: Turton CHC 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required Gqayinyanga Clinic
Date Submitted 2019-04-24 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
08/1920
Item Category: Services 
Item Description: BUGLAR GUARDS FOR GQAYINYANGA CLINIC AND NURSES HOME

Quantity (if supplies) ONCE OFF SERVICE

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Briefing Session 
Date : 2019-05-02 
Time: 11:00AM
Venue: GQAYINYANGA CLINIC
QUOTES CAN BE COLLECTED FROM: GQAYINYANGA CLINIC
QUOTES SHOULD BE DELIVERED TO: TURTON CHC

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

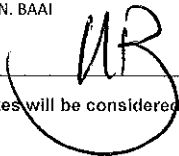
Name: NKOSINATHI HLOPHE
Email: nkosinathi.hlophe@kznhealth.gov.za
Contact Number:

039 972 6095

Finance Manager Name:

MISS N. BAAI

Finance Manager Signature:

A handwritten signature in black ink, appearing to be 'NB', is written over a horizontal line. The signature is enclosed within a large, hand-drawn circle.

No late quotes will be considered