



Quotation Advert

Opening Date: 2019-04-03 
Closing Date: 2019-04-10 
Closing Time: 11:00

INSTITUTION DETAILS



Institution Name: Edendale hospital 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required Edendale Hospital
Date Submitted 2019-04-02 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
1653/18
Item Category: Goods 
Item Description: Premicath 1FR catheter with polyurethane material:code 1261.201,
Length 20cm, 008ml priming volume 1.0ml/min and microflash 20G

Quantity (if supplies) 100 units

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Select... 
Date : 

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: Edendale Hospital Supply Chain (stores)

QUOTES SHOULD BE DELIVERED TO: Edendale Hospital blue tender box by security main gate

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Philani Moyo
Email: philani.moyo@kznhealth.gov.za
Contact Number:

033 395 4250





Finance Manager Name:

Mr D. Thangalan

Finance Manager Signature:



No late quotes will be considered

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health

Department:
Health
PROVINCE OF KWAZULU-NATAL

ZNQ 1653/18

DIRECTORATE NURSING

Physical Address: No. 89 Selby Msimang Road, Pietermaritzburg, 3216
Postal Address: P/Bag X 509, PLESSISLAER, 3216
Tel: 033 395 4341 Fax: 033 395 4039 Email: edh3nicu@kznhealth.gov.za

EDENDALE HOSPITAL

SECTION A-General

CLAUSE		
G1	Bidders must quote on the supply and delivery of the item.	
G2	The item must be SABS/SANS approved.	
G3	Bidders must provide a clear picture of the item quoted for.	
G3.1	Please state brand name of item quoted for:	
G4	Bidder must state the guarantee period of the item quoted for	_____ months
G5	Bidder must ensure that brochures and directions for use are included	

SECTION B - Technical Specification

Clause	Clause description	Bidders remarks
T1	The required is a premicath	
T2	1 FR	
T3	Length 20cm	
T4	1.0ml/min	
T5	Microflash 20g	
T6	-It must be made of soft material that softens at body temperature .	

Compiled N. C. SIMBLE

Signature *[Handwritten Signature]*

SECTION C-Confirmation

Compulsory to be completed by by the bidder and returned with quotation

I, _____, from _____ do hereby
(Name of business)
Acknowledge that I have read and understand the specifications as laid out above and will ensure that the quotation price submitted will address all the requirements as stipulated .

Signature

_____/_____/_____
Date