



## Quotation Advert

Opening Date: 2019-12-10

Closing Date: 2019-12-17

Closing Time: 11:00

### INSTITUTION DETAILS

Institution Name: Hillcrest hospital

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: Hillcrest Hospital

Date Submitted: 2019-12-10

### ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:  
21/12/2019

Item Category: Select...

Item Description: Hand Evaluation Kit (7 piece)

Quantity (if supplies): 01

### COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: SCM Department, Hillcrest Hospital, 50 Hospital Road, Hillcrest

QUOTES SHOULD BE DELIVERED TO: Tender Box, Hillcrest Hospital, 50 Hospital Road, Hillcrest, 3650

### ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: R. Chonnoolal

Email: revaan.chonnoolal@kznhealth.gov.za

Contact Number: 0317615908

Finance Manager Name: S. Cotchobos

Finance Manager Signature:

No late quotes will be considered