







Opening Date: 19/02/2019 
Closing Date: 26/02/2019 
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: NGWELEZANA HOSPITAL THANDUYISE ROAD, EMPANGENI
Date Submitted: 18/02/2019 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
A209/18-19
Item Category: Services 
Item Description: PROVISION OF CASH IN TRANSIT SERVICES FOR 1 YEAR


Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 
Date : 
Time:
Venue:

QUOTES CAN BE COLLECTED FROM: NGWELEZANE HOSPITAL SCM DEPT ((STORES)

QUOTES SHOULD BE DELIVERED TO: NGWELEZANE HOSPITAL TENDER BOX NEXT TO OPD

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: N. SMNGOMEZULU/R.T MKHUMBUZI
Email: nomathandazo.mngomezulu@kznhealth.gov.za
Contact Number:

035 901 7228

Finance Manager Name:

MRS S.P MENYUKA

Finance Manager Signature:



No late quotes will be considered