| health Department: Health PROVINCE OF KWAZULU-NATAL | uotation Advert |
|---|--|
| Opening Date: | 18/01/2019 |
| Closing Date: | 25/01/2019 |
| Closing Time: | 11:00 |
| INSTITUTION DETAILS | |
| Institution Name: | Gamalakhe CHC |
| Province: | KwaZulu-Natal |
| Department or Entity: | Department of Health |
| Division or section: | Central Supply Chain Management |
| Place where goods / services is required | GAMALAKHE CHC |
| Date Submitted | 16/01/2019 |
| ITEM CATEGORY AND DETAILS | |
| Quotation Number: | ZNQ: GCHC178/1819 |
| Item Category: | Services |
| Item Description: | SUPPLY & INSTALL ROAD DIRECTIONAL SIGNAGE TO SHELLY BEACH CLINIC -07 PORT EDWARD CLINIC-05 NTABENI CLINIC-04 |
| Quantity (if supplies) | 07,05,04 |
| COMPULSORY BRIEFING SESSION / SITE VISIT | |
| Select Type: | Select |
| Date: | |
| Time: | |
| Venue: | |
| QUOTES CAN BE COLLECTED FROM: | GAMALAKHE CHC |
| QUOTES SHOULD BE DELIVERED TO: | GAMALAKHE CHC (TENDER BOX) |
| ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: | |
| Name: | MR P NGUBO |
| Email: | philani.ngubo@kznhealth.gov.za |
| Contact Number: | 039 318 1113 |
| Finance Manager Name: | MRS BP MTHEMBU |
| Finance Manager Signature: | (B) Interest (B) I |