as Ma	health
	Department:
	PROVINCE OF KWAZULU-NATAL

Quotation Advert

Opening Date:	2019-07-15	(ii.g
Closing Date:	2019-08-01	i.e.
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Clairwood hospital	\searrow
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	The state of the s	
Date Submitted	2019-07-15	
ITEM CATEGORY AND DETAILS	£	
Quotation Number:	ZNQ:	
Item Category:	Services	$\mathbf{\nabla}$
Item Description:	ESTABLISH MEDICINE STORE ROOM AT GATEWAY	
		ny nistra printe de la company de la comp
Quantity (if supplies)		
COMPULSORY BRIEFING SESSION	/ SITE VISIT	
Select Type:	Compulsory Site Visit	~
Date:	2019-07-23	
Time:	9h30	
Venue:	CLAIRWOOD HOSPITAL	
V3 1,431	CLARWOOD HOST TAL	
QUOTES CAN BE COLLECTED FROM:	DOCUMENTS WILL BE ISSUED AT SITE MEETING	
QUOTES SHOULD BE DELIVERED TO:	DROP QUOTATION AT CLAIRWOOD HOSPITAL TENDER BOX	
ENQUIRIES REGARDING THE ADVI	ERT MAY BE DIRECTED TO:	
Name:	Mrs L.B. Zimu	
Email:	lungile.zimu@kznhealth.gov.za	
Contact Number:	031-4515114	
Finance Manager Name:	Jyrs S.G. Mkhize	
Finance Manager Signature:	o late quotes wilk the considered	_