

Opening Date: 2019-07-09

Closing Date: 2019-07-15

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: G. J. Crookes hospital

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required GJ Crookes Hospital

Date Submitted 2019-09-08

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
377/19

Item Category: Goods

Item Description: MOBILE DENTAL CHAIR

Quantity (if supplies) 1

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: GJ CROOKES HOSPITAL-NO.1 HOSPITAL ROAD AT SCM

QUOTES SHOULD BE DELIVERED TO: GJ CROOKES HOSPITAL NEXT TO RECEPTION (HAND DELIVER)

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: S Dlomo

Email: Sindy.Dlomo@kznhealth.gov.za

Contact Number: 039-9787160

Finance Manager Name: Miss SZG Nguse

Finance Manager Signature:



No late quotes will be considered