



**health**  
Department  
Health  
PROVINCE OF KWAZULU-NATAL

## Quotation Advert

**Opening Date:** 20/03/2019

**Closing Date:** 11/04/2019

**Closing Time:** 11:00

### INSTITUTION DETAILS

**Institution Name:** Port Shepstone hospital

**Province:** KwaZulu-Natal

**Department or Entity:** Department of Health

**Division or section:** Central Supply Chain Management

**Place where goods / services is required** PORT SHEPSTONE HOSPITAL (Maintenance Department)

**Date Submitted** 20/03/2019

### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
PSH 19/1920

**Item Category:** Services

**Item Description:** INFRA RED TESTING AT 7 CLINICS

**Quantity (if supplies)** 7

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Compulsory Briefing Session

**Date :** 03/04/2019

**Time:** 11:00

**Venue:** PORT SHEPSTONE HOSPITAL

**QUOTES CAN BE COLLECTED FROM:** PORT SHEPSTONE HOSPITAL MAINTENANCE DEPARTMENT

**QUOTES SHOULD BE DELIVERED TO:** PORT SHEPSTONE HOSPITAL

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

**Name:** SR MOODLEY

**Email:** surendra.premnadu@kznhealth.gov.za

**Contact Number:** 039-688 6232

**Finance Manager Name:** N. S. B. RAJEBE

**Finance Manager Signature:**

*(Handwritten signature of N. S. B. Rajebe)*  
No late quotes will be considered