

Contact Number:

## **Quotation Advert**

Height PROVINCE OF KWAZULUHATAL		
Opening Date:	2019-05-28	Carrene,
Closing Date:	2019-06-05	, and the same of
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Itshelejuba hospital	<u>~</u>
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	ITSHELEJUBA HOSPITAL	
Date Submitted	2019-05-27	i ja Accordiné
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: 071/19/20	
Item Category:	Services	<u> </u>
Item Description:	MAJOR SERVICE TO PARTICLE COUNT	
	CIDB. <del>I</del> ME	
	DETAILED SPEC AVAILABLE WITH QUOTATION	
	FAXED OR EMAILED DOCUMENTS ARE ACCEPTED	
	TAKED OR ENMILLED DOCUMENTS ARE ACCEPTED	
Quantity (if supplies)		
COMPULSORY BRIEFING SESSION	I / SITE VISIT	
Select Type:	Not Applicable	<u>~</u> ]
Date:		Attracts 1 1
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	ITSHELEJUBA HOSPITAL	
QUOTES SHOULD BE DELIVERED TO:	ITSHELEJUBA HOSPITAL - TENDER BOX AT MAIN SECURITY GATE	
ENQUIRIES REGARDING THE ADVI	ERT MAY BE DIRECTED TO:	
Name:	SAMU MAPHISA	
Email:	samukelisiwe.maphisa@kznhealth.gov.za	

034 413 4000
Finance Manager Name: MR C NHIEKO

No late quotes will be considered

Finance Manager Signature:

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