

## **Quotation Advert**

| Opening Date;                                      | 2019-05-29   |
|--|--|
| دين<br>Closing Date:                               | 2019-06-11   |
| 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           | PORT EDWARD CLINIC   |
| Date Submitted                                     | 2019-05-28   |
| ITEM CATEGORY AND DETAILS                          |  |
| Quotation Number:                                  | ZNQ: //<br>GCHC034/1920  |
| Item Category:                                     | Services   |
| Item Description:                                  | REPAIRS TO BOUNDERY FENCING AND CONSTRUCTION OF STORM WATER DRAINS AT PORT EDWARD CLINIC |
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| Quantity (if supplies)                             |  |
| COMPULSORY BRIEFING SESSION / SITE VISIT           |  |
| Select Type:                                       | Compulsory Briefing Session  |
| Date :   | 2019-06-04   |
| Time:  | 12h00  |
| Venue:   | PORT EDWARD CLINIC   |
|  | ONE EDVANG CEING   |
| QUOTES CAN BE COLLECTED FROM:                      | ON SITE AT PORT EDWARD CLINIC  |
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| QUOTES SHOULD BE DELIVERED TO:                     | GÄMALAKHE CHCTENDER BOX  |
| ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: |  |
| Name:  | PHILANI NGUBO  |
| Email:   | philani.ngubo@kznhealth.gov.za   |
| Contact Number:                                    | 039 318 1113   |
| Finance Manager Name:                              | MRS BP MTHEMBU   |
| Finance Manager Signature:                         | BINA   |