health Department:	Quota
PROYNCE OF KNAZULU-NATAL	
Opening Date:	201
Closing Date:	201
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Tow
Province:	Kważ
Department or Entity:	Depa
Division or section:	Centi
Place where goods / services is required	TOW
Date Submitted	်201
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ:
	37/19
Item Category:	Servi
Item Description:	° 10.0

## ation Advert

Opening Date:	2019-05-03	- His
Closing Date:	2019-05-16	110
Closing Time:	11:00	HI.
INSTITUTION DETAILS		
Institution Name:	Town Hill hospital	V
Province:	KwaZulu-Natal	لغا
Department or Entity;	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	TOWNHILL HOSPITAL	
Date Submitted	2019-05-02	===
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: 37/19	
Item Category:	Services	V
Item Description:	TO CARRY OUT A SERVICE ON SPECIFIED COLD ROOMS AS PER SPECIFICATION ON THE TENDER DOCUMENT ( 2 YEAR CONTRACT )  -CIDB REQUIREMENTS:1ME (MUST SUBMIT PROOF WITH QUOTATION DOCUMENT)  -CONTRACTORS TO SPECIALIZE IN REFRIDGERATION UNIT/EQUIPMENT ( MUST SUBMIT PROOF WITH QUOTATION	
	DOCUMENT) -CONTRACTORS TO PROVIDE PROOF (PREVIOUS WORK DONE - CONTACTABLE REFERENCES)	oper days descriptions
Quantity (if supplies)	AS PER SPECIFICATION ON THE TENDER DOCUMENT	
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Compulsory Site Visit	$\subseteq$
Date:	2019-05-09	===
Time:	10H00	
Venue:	SCM DEPARTMENT - TOWNHILL HOSPITAL	- and other spin
QUOTES CAN BE COLLECTED FROM:	SCM FROM 08H00 TO 09H50 ON SITE MEETING DATE	7
QUOTES SHOULD BE DELIVERED TO:	TENDER BOX NEXT TO SECURITY OFFICE AT THE ENTRANCE GATE -THH	
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	MDAKANE MJ / PERUMAL JUNICA	
Email:	junica.perumal@kznhealth.gov.za	
Contact Number:	033 3415620/22	1
Finance Manager Name:	Mr. K. Ndela	
Finance Manager Signature:		

No late quotes will be considered