

Quotation Advert

Opening Date: 2019-05-29
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: Gamalakhe CHC
Date Submitted: 2019-05-28

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
GCHC 037/1920
Item Category: Services
Item Description: SERVICING VACUUM PLANT ROOM AT GAMALAKHE CHC
REQUIREMENT: CIDB ME1
Quantity (if supplies)

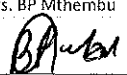
COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Visit
Date: 2019-06-04
Time: 10h00
Venue: GAMALAKHE CHC - BOARDROOM

QUOTES CAN BE COLLECTED FROM: GAMALAKHE CHC ON SITE MEETING DATE

QUOTES SHOULD BE DELIVERED TO: OFF RAY NKONYENI ROAD CORNER MICHEAL NSIMBI & REV SITHOLE ROAD GAMALAKHE

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: HLENGIWE KHOWA
Email: hlengiwe.khowa@kznhealth.gov.za
Contact Number: 039 318 1113
Finance Manager Name: Mrs. BP Mthembu
Finance Manager Signature: 

No late quotes will be considered