




Opening Date: 2019-05-28 
Closing Date: 2019-06-04 
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Grey's hospital 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required Grey's Hospital
Date Submitted 2019-05-24 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
6137/03/19
Item Category: Goods 
Item Description: Cryotherapy delivery system (liquid nitrogen cryosurgical spray system)

Quantity (if supplies) one

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 
Date : 
Time:
Venue:

QUOTES CAN BE COLLECTED FROM:

QUOTES SHOULD BE DELIVERED TO: Grey's Hospital

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Nomfundo Ngubane
Email: nomfundo.shelembe@kznhealth.gov.za
Contact Number: 033 897 3481
Finance Manager Name: Mrs T.M Mazibuko

Finance Manager Signature: 

No late quotes will be considered