



Opening Date: 2019-11-04 
Closing Date: 2019-11-18 
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Othobothini CHC
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required OTHOBOTHINI CHC,D850 ROAD NEXT TO MSIYANE HIGH SCHC
Date Submitted 2019-11-01 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
140/19/20-OTH CHC
Item Category: Services
Item Description: SUPPLY ,DELIVER AND INSTALL

1. ROAD DIRECTIONAL SIGNAGE


REQUIREMENTS

*COMPANIES MUST HAVE A MINIMUM CIDB 1GB AND 1SK

NB: QUOTATION DOCUMENTS WILL BE ISSUED ON SITE.

Quantity (if supplies) :13 UNITS

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Visit
Date : 2019-11-11 
Time: 11:00
Venue: OTHOBOTHINI CHC,D850 ROAD NEXT TO MSIYANE HIGH SCHOOL,JOZINI,3969

QUOTES CAN BE COLLECTED FROM: OTHOBOTHINI CHC,D850 ROAD NEXT TO MSIYANE HIGH SCHOOL,JOZINI,3969

QUOTES SHOULD BE DELIVERED TO: TENDER BOX/ othobothini.quotations@gmail.com

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

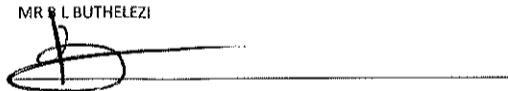
Name: P MYENI
Email: othobothini.quotations@gmail.com
Contact Number:

0793899654 / 0355917004

Finance Manager Name:

MR B L BUTHELEZI

Finance Manager Signature:

A handwritten signature in black ink, appearing to be 'B L Buthelezi', written over a horizontal line. The signature is stylized with a large loop at the beginning.

No late quotes will be considered