



Opening Date: 2019-11-12 

Closing Date: 2019-11-21 

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Mosvold hospital 

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: MOSVOLD HOSPITAL

Date Submitted: 2019-11-11 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
287 / 2019 / 2020

Item Category: Goods 

Item Description: SUPPLY HAND HELD RETINOSCOPE

Quantity (if supplies) 02


COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date : 

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: MOSVOLD HOSPITAL
SCM DEPARTMENT 

QUOTES SHOULD BE DELIVERED TO: MOSVOLD HOSPITAL
TENDER BOX AT MAIN GATE

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: MISS NONHLAHLA ZIKHALI

Email: nonhlanhla.zikhali@kznhealth.gov.za

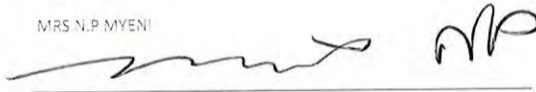
Contact Number:

Finance Manager Name:

035 591 0122

MRS N.P MYENI

Finance Manager Signature:



A handwritten signature in black ink, appearing to read 'N.P. Myeni', is written over a horizontal line. To the right of the signature, there are two large, stylized initials 'NP'.

No late quotes will be considered