

## Quotation Advert

Opening Date: 18/11/2019  
Closing Date: 22/11/2019

Closing Time: 11:00

### INSTITUTION DETAILS

Institution Name: UNTunjambili Hospital  
Province:  
Department or Entity: Department of Health  
Division or section: Central Supply Chain Management  
Place where goods / services is required: UNTunjambili Hospital  
Date Submitted:

### ITEM CATEGORY AND DETAILS

Quotation Number: ZNO 321/2019/20  
Date submitted: 15/11/2019  
Item Category: SERVICE  
Item Description: Particle count and issuing of test report for theatre 1, theatre 2 and recovery room (Service required in January 2020)  
QUANTITY=03  
Required CIBD Grading:EB

### COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: N/A  
Date: N/A  
Time: Venue: N/A

QUOTES CAN BE COLLECTED FROM: N/A

QUOTES SHOULD BE DELIVERED TO: N/A

### ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: PORTIA BUTHELEZI  
Email: Zanele.makhwasa@kznhealth.gov.za  
Contact Number: 033 444 0818  
Finance Manager Name: ZANELE MAKHWASA

Finance Manager Name:

Finance Manager Signature: 