






Quotation Advert

Opening Date: 2019-11-18 
Closing Date: 2019-11-26 
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Hlabisa hospital 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required HLABISA HOSPITAL
Date Submitted 2019-11-15 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
395-19/20
Item Category: Services 
Item Description: PEST CONTROL FOR CLINICS:
*MPEMBENI CLINIC
*INHLWATHI CLINIC
*MAKHOWE CLINIC
*MACABUZELA CLINIC
*NKUNDUSI CLINIC
*NTONDWENI CLINIC
*MADWALENI CLINIC

*NB: THERE WILL BE A VISIT FOR EACH CLINIC

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Visit 
Date : 2019-11-21 
Time: 09:00
Venue: MEETING WILL START AT MPEMBENI CLINIC

QUOTES CAN BE COLLECTED FROM: MADWALENI CLINIC

QUOTES SHOULD BE DELIVERED TO: 60 SAUNDERS STREET HLABISA HOSPITAL MAINGATE TENDERBOX

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

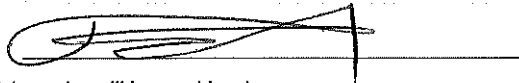
Name: MR AN SITHOLE
Email: ayanda.sithole@kznhealth.gov.za
Contact Number:

035 838 8780/8776/8625 OR OUR FAX NUMBER IS 035 838 1959

Finance Manager Name:

MISS NB MASONDO

Finance Manager Signature:

A handwritten signature in black ink, appearing to read 'MISS NB MASONDO', is written over a horizontal line. The signature is stylized and somewhat cursive.

No late quotes will be considered