


Quotation Advert

Opening Date: 2019-10-21 
Closing Date: 2019-10-31 
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: St Apollinaris hospital 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required: ST APOLLINARIS HOSPITAL
Date Submitted: 2019-10-18 



ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
15/2019/2020
Item Category: Services 
Item Description: SERVICE PROVIDER TO DO REPLACEMENT OF ROOF COVERING
AT RIVERSIDE CLINIC .THE SERVICE PROVIDER MUST BE 1GB OR ABOVE .

NB :SUPPLIERS MUST VISIT THE CLINIC ABOUT +-15KM FROM THE
HOSPITAL

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Briefing Session 
Date : 2019-10-24 
Time: 11:00AM
Venue: LECTURE HALL

QUOTES CAN BE COLLECTED FROM: ST APOLLINARIS HOSPITAL

QUOTES SHOULD BE DELIVERED TO: TENDER BOX/ StApollinaris.scm@kznhealth.gov.za

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: MS F S ZUMA
Email: 
Contact Number: 0398338054/8091
Finance Manager Name: MRS M B KHESWA

Finance Manager Signature: 

No late quotes will be considered