



Quotation Advert

Opening Date: 2019-10-10
 Closing Date: 2019-10-18
 Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Greytown hospital
 Province: KwaZulu-Natal
 Department or Entity: Department of Health
 Division or section: Central Supply Chain Management
 Place where goods / services is required: SCM
 Date Submitted: 2019-10-10

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: 24/10/2019
 Item Category: Goods
 Item Description: SUPPLY AND DELIVER COVER HEALTH SERVICE
 Quantity (if supplies): 260 PKTS

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable
 Date :
 Time:
 Venue:

QUOTES CAN BE COLLECTED FROM: GREYTOWN HOSPITAL (SCM) FROM 7:30 TO 16:00 WEEKDAYS

QUOTES SHOULD BE DELIVERED TO: Greytown Hosp bell street -must be deposited in a tender box next to the gate or email to bongukwanda.dlamini@kznhealth.gov.za

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Ms. P.N Khanyile or Mrs T.R. Jali
 Email: siyabonga.mzolo@kznhealth.gov.za
 Contact Number: 033 4139 431 Ext:291
 Finance Manager Name: MR R. Haniff
 Finance Manager Signature: 

No late quotes will be considered