




Quotation Advert

Opening Date: 2019-10-14 

Closing Date: 2019-10-18 

Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Hlengisizwe CHC 

Province: KwaZulu-Natal

Department or Entity: Department of Health


Division or section: Central Supply Chain Management

Place where goods / services is required: HLENGISIZWE CHC

Date Submitted: 2019-10-11 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
396/19/20


Item Category: Services 

Item Description: SERVICE OF FIRE ALARM SYSTEM AT HLENGISIZWE CHC

Quantity (if supplies): 58

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date: 

Time: 

Venue: 

QUOTES CAN BE COLLECTED FROM: HLENGISIZWE CHC

QUOTES SHOULD BE DELIVERED TO: HLENGISIZWE CHC

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: MG MAKHAYE

Email: HLENGISIZWE.SCM@KZNHEALTH.GOV.ZA

Contact Number:





Finance Manager Name:

031-7741038/1039

M.P. KHUMALO

Finance Manager Signature:

No late quotes will be considered

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