



Quotation Advert

Opening Date: 2019-10-22 
Closing Date: 2019-10-28 
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Head Office Quotations
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required: DR PIXLEY KA SEME MEMORIAL HOSPITAL
Date Submitted: 2019-10-22 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
ZNQ864/19/20-H
Item Category: Goods
Item Description: SUPPLY AND DELIVER OF SCOPE, URO, RIGID.

Quantity (if supplies) 02

COMPULSORY BRIEFING SESSION / SITE VISIT


Select Type: Not Applicable
Date : 
Time:
Venue:

QUOTES CAN BE COLLECTED FROM: 310 Jabu Ndlovu, Old Boys Model

QUOTES SHOULD BE DELIVERED TO: 310 Jabu Ndlovu street, SCM Office, Quotation Tender box quotations.

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Nontobeko Khumalo
Email: nontobeko.khumalo@kznhealth.gov.za
Contact Number: 033 815 8404
Finance Manager Name: Mrs N Khanyile

Finance Manager Signature: 

ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS / SERVICES / WORKS OFFERED? **[IF YES ENCLOSE PROOF]**

OFFICIAL PRICE PAGE FOR QUOTATIONS

SIGNATURE OF BIDDER DATE.....
 [By signing this document I hereby agree to all terms and conditions]

CAPACITY UNDER WHICH THIS QUOTE IS SIGNED.....

| Item No | Quantity | Description | Brand & model | Country of manufacture | Price | |
|---|----------|--|---------------|------------------------|-------|---|
| | | | | | R | c |
| 1 | 02 | SUPPLY AND DELIVER OF SCOPE, URO, RIGID | | | | |
| | | (DR PIXLEY KA ISAKA SEME HOSPITAL) | | | | |
| | | NB: Specification attached | | | | |
| | | NB: BROCHURE MUST BE ATTACHED | | | | |
| | | Original documents required in a sealed envelope with current CSD summary report reflecting banking details, certified copy of B-BBEE certificate by verified agency and accredited by SANAS , Tax Clearance certificate or SARS pin | | | | |
| | | Responses to be delivered:310 Jabu Ndlovu street,old boys Model,Quotation tender box Or musawenkosi.sokhela@kznhealth.gov.za | | | | |
| VALUE ADDED TAX (Only if VAT Vendor) | | | | | | |
| TOTAL QUOTATION PRICE (VALIDITY PERIOD 60 Days) | | | | | | |

| | |
|--|---|
| Does This Offer Comply With The Specification? Is The Price Firm? | Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification? State Delivery Period E.G. E.G. 1day, 1week |
|--|---|

| | |
|---|--|
| Enquiries regarding the <u>quote</u> may be directed to: Contact Person: Ntobe Khumalo Tel: 033-815 8404 | Enquiries regarding <u>technical information</u> may be directed to: Contact Person: Nishan Singh Tel: 082 336 8240 |
|---|--|

