




Opening Date: 2019-10-29 

Closing Date: 2019-11-04 

Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Dundee hospital 

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required DUNDEE HOSPITAL

Date Submitted 2019-10-24 

ITEM CATEGORY AND DETAILS


Quotation Number: ZNQ:
98/2019-2020MAINT


Item Category: Goods 

Item Description: TUBES FLUORESCENT U-TUBE

Quantity (if supplies) 200

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date : 

Time:

Venue:

QUOTES CAN BE COLLECTED FROM:

QUOTES SHOULD BE DELIVERED TO:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Nomasonto Nkosi

Email: nomasonto.nkosi@kznhealth.gov.za

Contact Number:

034 218 1245

Finance Manager Name:

R.Pargas

Finance Manager Signature:

A handwritten signature in black ink, appearing to be 'R. Pargas', is written over a horizontal line. The signature is stylized and somewhat cursive.

No late quotes will be considered