

Opening Date: 2019-10-25 

Closing Date: 2019-11-08 

Closing Time: 11:00

## INSTITUTION DETAILS

Institution Name: Select... 

Province: KwaZulu-Natal

Department or Entity: Department of Health


Division or section: Central Supply Chain Management

Place where goods / services is required UMPHUMULO HOSPITAL

Date Submitted 2019-10-25 

## ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:  
C303/19/20

Item Category: Goods 

Item Description: AUTOCLAVE 16LT -SEMI AUTOMATIC

Quantity (if supplies) 01

## COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date : 

Time:

Venue:

**QUOTES CAN BE COLLECTED FROM:** R 74 GREYTOWN ROAD MAPHUMULO 4470 (UMPHUMULO HOSPITAL)

**QUOTES SHOULD BE DELIVERED TO:** R 74 GREYTOWN ROAD MAPHUMULO 4470 (SECURITYMAIN GATE)

## ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: SIBONELO SITHOLE

Email: SIBONELO.SITHOLE@KZNHEALTH.GOV.ZA

Contact Number:

# Supply Chain Management - AdvertQuote

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032 481 4181 /03

**Finance Manager Name:**





MRS NM SELEPE

**Finance Manager Signature:**



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**No late quotes will be considered**

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