

Finance Manager Signature:

## **Quotation Advert**

Opening Date:	2019-09-25
Closing Date:	2019-10-02
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Pomeroy CHC
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	POMEROY CHC
Date Submitted	2019-09-25
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 136/19/20
Item Category:	Services
Item Description:	MAJOR SERVICE TO KITCHEN EQUIPMENT
Quantity (if supplies)	01
COMPULSORY BRIEFING SESSION	
Select Type:	Not Applicable
Date :	
Time:	
venue:	
QUOTES CAN BE COLLECTED FROM:	POMEROY CHC
QUOTES SHOULD BE DELIVERED TO:	QUOTATION MUST BE DEPOSITED IN THE TENDER BOX (NEXT TO SECURITY ROOM) WHICH IS ACCESSIBLE 24 HOURS
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:
Name:	Ms T.B MNTUNGWA
Email:	Thembelihle.Mntungwa@kznhealth.gov.za
Contact Number:	
	034 662 3349

No late quotes will be considered