



## Quotation Advert

Opening Date: 2019-09-04 

Closing Date: 2019-09-11 

Closing Time: 11:00

### INSTITUTION DETAILS


Institution Name: Pholela CHC 

Province: KwaZulu-Natal

Department or Entity: Department of Health


Division or section: Central Supply Chain Management

Place where goods / services is required: Pholela CHC

Date Submitted: 2019-09-02 

### ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:  
144/19/20PCHC


Item Category: Services 

Item Description: Painting of clinic

Quantity (if supplies):

### COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Visit 

Date : 2019-09-06 

Time: 11:00

Venue: Sandanezwe clinic

QUOTES CAN BE COLLECTED FROM: Sandanezwe clinic

QUOTES SHOULD BE DELIVERED TO: Pholela CHC

### ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Hlengiwe Mkhize

Email: hlengiwe.mkhize@kznhealth.gov.za

Contact Number:

**Finance Manager Name:**

039 8329491

T.Q Zulu

**Finance Manager Signature:**

A handwritten signature in black ink, appearing to be 'T.Q Zulu', is written over a horizontal line. The signature is stylized with a large loop and a vertical stroke.

**No late quotes will be considered**