

Opening Date: 2019-09-11
Closing Date: 2019-09-18
Closing Time: 11:00



INSTITUTION DETAILS

Institution Name: Ngwelezane hospital
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required: NGWELEZANA HOSPITAL
Date Submitted: 2019-09-09



ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: A184/19-20
Item Category: Goods
Item Description: GSI DISPOSABLE SHAP WET GEL ELECTRODES



Quantity (if supplies) 50 PKTS

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable
Date :
Time:
Venue:



QUOTES CAN BE COLLECTED FROM:

NGWELEZANA HOSPITAL SCM COUNTER

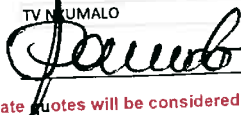
QUOTES SHOULD BE DELIVERED TO:

NGWELEZANA HOSPITAL TENDER BOX NEXT TO OPD

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: NZ DLADLA/MS MNGOMEZULU
Email: nomathandazo.mngomezulu@kznhealth.gov.za
Contact Number: 035 901 7228/7180
Finance Manager Name: TV N. UMALO

Finance Manager Signature:



No late quotes will be considered