



Quotation Advert

Opening Date: 2019-09-27
 Closing Date: 2019-10-07
 Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Murchison hospital
 Province: KwaZulu-Natal
 Department or Entity: Department of Health
 Division or section: Central Supply Chain Management
 Place where goods / services is required: N2 Main Harding Road Murchison Hospital
 Date Submitted: 2019-09-25

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: C32/19/20
 Item Category: Goods

Item Description: 4-Bay high density filling system .Supply deliver and install

Quantity (if supplies): 01 Units

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable
 Date :
 Time:
 Venue:

QUOTES CAN BE COLLECTED FROM: N2 Main Harding Road Murchison Hospital

QUOTES SHOULD BE DELIVERED TO: N2 Main Harding Road Murchison Hospital

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: SIBONISO
 Email: scm.murchisonhospital@kznhealth.gov.za
 Contact Number: 039 687 7311 ext. 170
 Finance Manager Name: Z.A CELE

Finance Manager Signature: