| health Department: Health PROVINCE OF KWAZULU-HATAL | Quotation Advert | |
|--|--|---|
| Opening Date: | 2020-08-17 | _ |
| Closing Date: | 2020-08-25 | |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | KwaMagwaza hospital ▽ | |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | Mainternamce | |
| Date Submitted | 2020-08-14 | |
| ITEM CATEGORY AND DETAILS | and the second s | |
| Quotation Number: | ZNQ: | |
| W O | SMKH 93-20-21 | |
| Item Category: Item Description: | Select ♣▽ | |
| | | |
| Quantity (if supplies) | | |
| COMPULSORY BRIEFING SESSION | I / SITE VISIT | |
| Select Type: | Compulsory Briefing Session | |
| Date : | 2020-08-21 | |
| Time: | 111100 | |
| Venue: | KwaMagwaza Hospital Dinning Hall | |
| QUOTES CAN BE COLLECTED FROM: | On Site | |
| QUOTES SHOULD BE DELIVERED TO: | KwaMagwaza Hospital Main gate, Tender Box | |
| ENQUIRIES REGARDING THE ADV | ERT MAY BE DIRECTED TO: | |
| Name: | Mr Thamsanga Masango | |
| Email: | bongani.mbozaki@kznhealth.gov.za | |
| Contact Number: | | |

Finance Manager Name: Mr B.S Mbokart
Finance Manager Signature:

No late guotes will be considered

Submit Save Save As... Close Print Preview