


**Opening Date:** 2020-02-20   
**Closing Date:** 2020-02-27   
**Closing Time:** 11:00

## INSTITUTION DETAILS



**Institution Name:** Queen Nandi   
**Province:** KwaZulu-Natal  
**Department or Entity:** Department of Health  
**Division or section:** Central Supply Chain Management  
**Place where goods / services is required** Queen Nandi Regional Hospital, 29 Union Street, Empangeni, 3880  
**Date Submitted** 2020-02-19 

## ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
894/19-20  
**Item Category:** Goods   
**Item Description:** Wall suction

**Quantity (if supplies)** 114 units

## COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not Applicable   
**Date :**   
**Time:**  
**Venue:**

**QUOTES CAN BE COLLECTED FROM:** Queen Nandi Regional Hospital, 29 Union Street, Empangeni, 3880

**QUOTES SHOULD BE DELIVERED TO:** Queen Nandi Regional Hospital, 29 Union Street, Empangeni, 3880

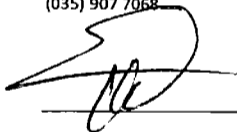
## ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

**Name:** Mr K.R. Nzimande  
**Email:** khayelihle.nzimande@kznhealth.gov.za  
**Contact Number:**

**Finance Manager Name:**

**Finance Manager Signature:**

(035) 907 7068

A handwritten signature in black ink, consisting of a large, stylized initial 'M' or 'N' followed by a horizontal line extending to the right.

**No late quotes will be considered**