

Opening Date: 2020-01-13

Closing Date: 2020-01-22

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: UMKHONTOKAYISE CLINIC

Date Submitted: 2020-01-10

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
A309/19-20

Item Category: Services

Item Description: REPAIR LIL PUT AT MKHONTOKAYISE CLINIC
CONTRACTOR MUST COMPLY WITH PIRB

Quantity (if supplies) 01 UNIT

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Visit

Date : 2020-01-16

Time: 12:00

Venue: MKHONTOKAYISE CLINIC

QUOTES CAN BE COLLECTED FROM: MKHONTOKAYISE CLINIC

QUOTES SHOULD BE DELIVERED TO: NGWELEZANA HOSPITAL TENDER BOX NEXT TO OPD

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: N.S MNGOMEZULU/ N.Z DLADLA

Email: nomathandazo.mngomezulu@kznhealth.gov.a

Contact Number:

035 901 7228/7180





Finance Manager Name:

MR L. SHANDU

Finance Manager Signature:



A handwritten signature in black ink, appearing to read 'MR L. SHANDU', is written over a horizontal line.

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