

## Quotation Advert

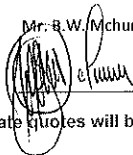
<b>Opening Date:</b>	2020-07-07	<input type="checkbox"/>
<b>Closing Date:</b>	2020-07-15	<input type="checkbox"/>
<b>Closing Time:</b>	11:00	
<b>INSTITUTION DETAILS</b>		
<b>Institution Name:</b>	Umzinyathi district office	<input checked="" type="checkbox"/>
<b>Province:</b>	KwaZulu-Natal	
<b>Department or Entity:</b>	Department of Health	
<b>Division or section:</b>	Central Supply Chain Management	
<b>Place where goods / services is required</b>	uMzinyathi Health District Office	
<b>Date Submitted</b>	2020-07-08	<input type="checkbox"/>
<b>ITEM CATEGORY AND DETAILS</b>		
<b>Quotation Number:</b>	ZNQ: 08MNT/2020/21	
<b>Item Category:</b>	Services	<input checked="" type="checkbox"/>
<b>Item Description:</b>	Upgrading on Existing Wash Bay at Dundee EMS Base	
<b>Quantity (if supplies)</b>	01	
<b>COMPULSORY BRIEFING SESSION / SITE VISIT</b>		
<b>Select Type:</b>	Compulsory Site Visit	<input checked="" type="checkbox"/>
<b>Date :</b>	2020-07-10	<input type="checkbox"/>
<b>Time:</b>	11:30	
<b>Venue:</b>	Endumeni EMS Base	
<b>QUOTES CAN BE COLLECTED FROM:</b>	Quotes will be Collected from the Site Briefing Only	
<b>QUOTES SHOULD BE DELIVERED TO:</b>	UMzinyathi Health District Office, 34 Wilson Street, Dundee	
<b>ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:</b>		
<b>Name:</b>	Khulekani Zondo	
<b>Email:</b>	khulekani.zondo@kznhealth.gov.za	
<b>Contact Number:</b>		

034 2999 162






**Finance Manager Name:**

Mr. B.W. Mchunu

**Finance Manager Signature:**

A handwritten signature in black ink, appearing to read 'B.W. Mchunu', is written over a horizontal line. The signature is somewhat stylized and partially obscured by a circular scribble.

No late quotes will be considered

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Notes: