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	Department: Health PROVINCE OF KWAZULU-NATAL
Openin	CHALLEST AND CONTRACTOR OF THE
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Quotation Advert

Opening Date:	2020-07-08			
Closing Date:	2020-07-15			
Closing Time:	11:00			
INSTITUTION DETAILS				
Institution Name:	eThekwini Metro district office			
Province:	KwaZulu-Natal			
Department or Entity:	Department of Health			
Division or section:	Central Supply Chain Management			
Place where goods / services is required	ETHEKWINI DISTRCT OFFICE			
Date Submitted	2020-07-07			
ITEM CATEGORY AND DETAILS				
Quotation Number:	ZNQ:			
	126.07.20-21			
Item Category:	Services			
Item Description:	REPAIRS TO EXTERIOR(SECURITY LIGHTS) & INTERIOR LIGHTS REQUIREMENTS; CIDB: 1EB			
Quantity (if supplies)				
COMPULSORY BRIEFING SESSION	I SITE VISIT			
Select Type:	Compulsory Briefing Session			
Date :	2020-07-10			
Time:	MA OE! OI AMOSHOUL			
Venue:	ETHEKWINI DISTRICT OFFICE			
QUOTES CAN BE COLLECTED FROM:	ETHEKWINI DISTRICT OFFICE			
QUOTES SHOULD BE DELIVERED TO:	ETHEKWINI DISTRICT OFFICE			
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:			
Name:	THEMBANI LUTHULI			
Email:	thembani.luthuli@kznhealth.gov.za			
Contact Number:	031 240 5517			
Finance Manager Name:	N. MKHATHINI			
Finance Manager Signature:	River			

No late quotes will be considered

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KZN Health Intranet

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PROVINCE OF KWAZULU-HATAL HOME COR

HOME CORPORATE INFORMATION

N COMPONENTS

DIRECTORY

DISTRICT OFFICES

HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

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health Department: Health PROVINCE OF KWAZULU-NAYAL	Quotation Advert
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INSTITUTION DETAILS	
Institution Name:	eThekwini Metro district office
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Place where goods / services is required	ETHEKWINI DISTRCT OFFICE
Date Submitted	2020-07-07
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ:
Maria Catanania	127.07.20-21
Item Category:	Services $igsep$
Item Description:	SUPPLY AND INSTALL SPLIT UNIT AIRCONS
	REQUIREMENTS
	CIDB: ME & EB
	A CHARLES
Quantity (if supplies)	
COMPULSORY BRIEFING SESSION	/ SITE VISIT
Select Type:	Compulsory Briefing Session
Date :	2020-07-10
Time:	WA OO TO AM
Venue;	KZN CHILDRENS HOSPITAL
QUOTES CAN BE COLLECTED FROM:	KZN CHILDRENS HOSPITAL
QUOTES SHOULD BE DELIVERED TO:	ETHEKWINI DISTRICT OFFICE
ENQUIRIES REGARDING THE ADVE	
Name:	THEMBANI LUTHULI
Email:	thembani.luthull@kznhealth.gov.za
Contact Number:	031 240 5517
Finance Manager Name:	N. WKHATHINI
•	() water
Finance Manager Signature:	late quotes will be considered
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