| health Dopartment: Health PROVINCE OF KMAZULUNATAL  | Quotation Advert   |
|---|--|
| Opening Date:   | 2020-05-20   |
| Closing Date:   | 2020-06-01   |
| Closing Time:   | 11:00  |
| NSTITUTION DETAILS  |  |
| nstitution Name:  | Osindisweni hospital   |
| Province:   | KwaZulu-Natal  |
| Department or Entity:   | Department of Health   |
| Division or section:  | Central Supply Chain Management  |
| Place where goods / services is required  | Osindisweni Hospital , Oakford Road , Verulam4340  |
| Pate Submitted  | 2020-05-20   |
| TEM CATEGORY AND DETAILS  |  |
| Quotation Number:   | ZNQ:   |
| tom Catagony  | 65-05-2020/21  |
| tem Category:<br>tem Description:   | Services  AFTER SERVICE REPAIRS TO THE LAUNDRY EQUIPMENT   |
|   |  |
| Quantity (if supplies)  | 01   |
|   | and the page terms of the  |
| COMPULSORY BRIEFING SESSION   | and the page terms of the  |
| COMPULSORY BRIEFING SESSION ( Select Type:  | I SITE VISIT   |
| COMPULSORY BRIEFING SESSION ( Select Type:  Date:   | / SITE VISIT Both  |
| COMPULSORY BRIEFING SESSION ( Select Type:  Date:   | / SITE VISIT  Both  2020-05-25   |
| COMPULSORY BRIEFING SESSION ( Select Type:  Date:  Time:  Venue:  | / SITE VISIT  Both  2020-05-25  11:00 AM   |
| COMPULSORY BRIEFING SESSION ( Select Type:  Date :  Fime:  Venue:  QUOTES CAN BE COLLECTED FROM:  | / SITE VISIT  Both  2020-05-25  11:00 AM  OSINDISWENI HOSPITAL MAINTENANCE DEPARTMENT  |
| COMPULSORY BRIEFING SESSION ( Select Type:  Date:  Filme:  Venue:  QUOTES CAN BE COLLECTED FROM:  QUOTES SHOULD BE DELIVERED TO:  | SITE VISIT  Both  2020-05-25  11:00 AM  OSINDISWENI HOSPITAL MAINTENANCE DEPARTMENT  AT SITE BRIEFING  OSINDISWENI HOSPITAL IN BOX NEAR SWITCHBOARD  |
| COMPULSORY BRIEFING SESSION ( Select Type: Date:  Time: Venue:  QUOTES CAN BE COLLECTED FROM:  QUOTES SHOULD BE DELIVERED TO:  ENQUIRIES REGARDING THE ADVE   | SITE VISIT  Both  2020-05-25  11:00 AM  OSINDISWENI HOSPITAL MAINTENANCE DEPARTMENT  AT SITE BRIEFING  OSINDISWENI HOSPITAL IN BOX NEAR SWITCHBOARD  |
| COMPULSORY BRIEFING SESSION A Select Type: Date:  Time: Venue:  QUOTES CAN BE COLLECTED FROM:  QUOTES SHOULD BE DELIVERED TO:  ENQUIRIES REGARDING THE ADVE   | / SITE VISIT  Both  2020-05-25  11:00 AM  OSINDISWENI HOSPITAL MAINTENANCE DEPARTMENT  AT SITE BRIEFING  OSINDISWENI HOSPITAL IN BOX NEAR SWITCHBOARD  RT MAY BE DIRECTED TO:  |
| Quantity (if supplies)  COMPULSORY BRIEFING SESSION of Select Type:  Date:  Time:  Venue:  QUOTES CAN BE COLLECTED FROM:  QUOTES SHOULD BE DELIVERED TO:  ENQUIRIES REGARDING THE ADVENTAME:  Email:  Contact Number: | / SITE VISIT  Both  2020-05-25  11:00 AM  OSINDISWENI HOSPITAL MAINTENANCE DEPARTMENT  AT SITE BRIEFING  OSINDISWENI HOSPITAL IN BOX NEAR SWITCHBOARD  RT MAY BE DIRECTED TO:  Suresh Parsutom   |
| COMPULSORY BRIEFING SESSION ( Select Type:  Date :  Time:  Venue:  QUOTES CAN BE COLLECTED FROM:  QUOTES SHOULD BE DELIVERED TO:  ENQUIRIES REGARDING THE ADVE  Name:  Email:   | / SITE VISIT  Both  2020-05-25  11:00 AM  OSINDISWENI HOSPITAL MAINTENANCE DEPARTMENT  AT SITE BRIEFING  OSINDISWENI HOSPITAL IN BOX NEAR SWITCHBOARD  RT MAY BE DIRECTED TO:  Suresh Parsutom  NO e-mailed Quotes Accepted = Only FAX OR DROP OFF |