

SharePoint

Hlongwane Thulani ▾ ?



KZN HEALTH

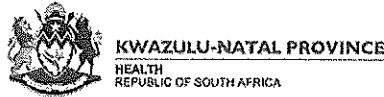
KZN Health Intranet

Search this site

HOME CORPORATE INFORMATION COMPONENTS DIRECTORY DISTRICT OFFICES HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

AdvertQuote



Quotation Advert

Opening Date:

Closing Date:

Closing Time:

INSTITUTION DETAILS

Institution Name:

Province:

Department or Entity:

Division or section:

Place where goods / services is required

Date Submitted

ITEM CATEGORY AND DETAILS

Quotation Number:

Item Category:

Item Description:
 NB:Following documents are required for evaluation qualification.
 CIDB,IEP & B

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM:

QUOTES SHOULD BE DELIVERED TO:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name:

Email:

Contact Number:

Finance Manager Name:

Finance Manager Signature:

No late quotes will be considered