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KZN Health Intranet

KZN HEALTH

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AdvertQuote



Quotation Advert

Opening Date: 2022-07-24

Closing Date: 2022-07-29

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: KwaMagwaza hospital

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: KwaMagwaza hospital

Date Submitted: 2022-07-19

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: KMG 53- 22-23

Item Category: Services

Item Description: Major service to air-conditioning units to minus 40 fridges gateway clinic
Requirements: Attach copy of trade test certificate (refrigeration)

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date:

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: From SCM office KwaMagwaza Hospital Melmoth 3835

QUOTES SHOULD BE DELIVERED TO: KwaMagwaza Hospital Main gate tender box

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Thoba Zulu

Email: thoba.zulu@kznhealth.gov.za

Contact Number: 035 450 8258

Finance Manager Name:

Mr B.S.Mbovazi

M. N. Buthelesi

Finance Manager Signature:

[Handwritten Signature]

No late quotes will be considered



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

St Mary's KwaMagwaza Hospital , Magwaza Road (8-9 KM)
Private Bag X 808 Melmoth 3835
Tel.: 035 450 8258 /450 8248, Fax.: 035 450 8253
Email.: andile.shandu@kznhealth.gov.za
Email.:Thoba.zulu@kznhealth.gov.za
www.kznhealth.gov.za

St Mary's KwaMagwaza Hospital
Supply Chain Management

Enquiries: SCM Office
Date: 18 July 2022
Tel. no.: 035 450 8248
Ref. no.: KMG 63-22-23

INVITATION TO QUOTE

ATT: SERVICE PROVIDER
FROM: KWAMAGWAZA HOSPITAL
RE: MAJOR SERVICE TO AIR-CONDITIONING UNITS AND MINUS 40 FRIDGES GATE CLINIC

You are cordially requested to give all-inclusive quotation for the above mentioned item:

| NO. | ITEM DESCRIPTION | QUANTITY | COMPLIANT TO SPECIFICATION | |
|-----|--|----------|----------------------------|----|
| | | | YES | NO |
| 1. | Major service to air-conditioning units and minus 40 fridges at gateway clinic | | | |
| 2. | -12000BTU split type | 08 | | |
| 3. | -Window walls | 02 | | |
| 4. | -minus 40 fridges | 02 | | |
| | Check ,adjust,clean as required | | | |

SCM REQUIRED DOCUMENTS TO BE ATTACHED

| DOCUMENTS REQUIRED | YES | NO |
|--|-----|----|
| 1.BBBEE Certificate | | |
| 2.Attach copy of trade test certificate(refrigeration) | | |
| | | |
| | | |

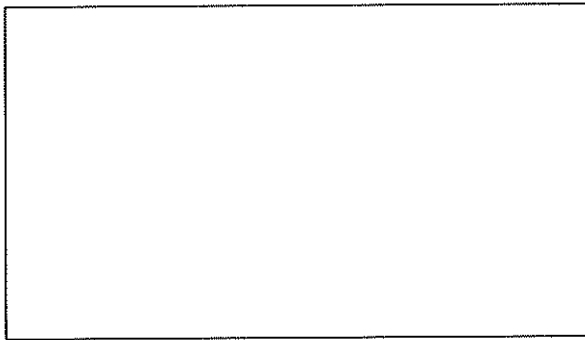
TO BE SIGNED BY THE SUPPLIER UPON COMPLETION:

Fighting Disease, Fighting Poverty, Giving Hope

I, the undersigned (**initial and surname**): _____
Certify that the information furnished above is correct. I also accept that this information will be used in the evaluation process and that my bid/quote may be rejected or accepted based on the information I furnished.

Signature: _____ **Position:** _____ **Date:** _____

SUPPLIER COMPANY STAMP:





KWAZULU-NATAL PROVINCE

HEALTH
REPUBLIC OF SOUTH AFRICA

KWAMAGWAZA DISTRICT HOSPITAL

KwaMagwaza Road, MELMOTH, 3835
Private Bag X808, MELMOTH, 3835
Tel: (035) 450 8256 / 8200 Fax: (035) 450 2050 Email: Nokuthula.Qwabe@kznhealth.gov.za
www.kznhealth.gov.za

**OFFICE OF THE SYSTEMS
MANAGEMENT**

GATEWAY CLINIC

SCOPE OF WORK: MAJOR SERVICE TO AIRCONDITIONING UNIT AND MINUS 40 FRIDGES

MANDATORY REQUIREMENT: attach a copy of trade test certificate – refrigeration

| DESCRIPTION OF WORK | QUANTITY | RATE | TOTAL |
|--|--|------|--------------|
| MAJOR SERVICE TO AIRCONDITIONING UNITS AND MINUS 40 FRIDGES. as per schedule Check, adjust, clean as required. | 8x 12000BTU split type 2X window walls 2x minus 40 Fridges | | |
| | | | |
| | | | TOTAL |

Compiled by:

Ms Z.H Shange

Chief Artisan

03/05/22

Date

