



KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Quotation Advert

Opening Date: 22/01/2026

Closing Date: 30/01/2026

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Emmaus Hospital

Province: KwaZulu-Natal

Department of entity: Department of Health

Division or section: Central Supply Chain Management

**Place where goods/
service is required:** Emmaus Hospital

Date Submitted: 22/01/2026

ITEM CATEGORY AND DETAILS

Quotation number: EMM155/10/25

Item Category: Services

Item Description: After service repairs to Air Conditioners at Emmaus Hospital

Quantity (if supplies):

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Meeting

Date: 27/01/2026

Time: 10h00

Venue: Maintanance

QUOTES CAN BE COLLECTED FROM: Site Meeting

QUOTES SHOULD BE DELIVERED TO: MAIN GATE

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name: S I Madondo

Email: EmmausQuotation@kznhealth.gov.za

Contact number: 036 488 8211

Finance Manager Name: Ms N.N Chonco

Finance Manager Signature: 



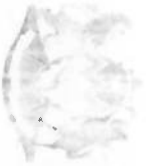
ANNEXURE A: SPECIFICATION FORM

NAME OF PROCURING FACILITY		EMMAUS HOSPITAL
ITEM DESCRIPTION		AFTER SERVICE REPAIRS OF AIR CONDITIONERS IN THE HOSPITAL
ITEM PURPOSE		To ensure that cooling and heating is done properly in the hospital
ITEM DETAILED SPECIFICATION (INCLUDE SIZE, COLOUR, MATERIAL, ETC.)		COMPLIES (YES/NO)
1.	You are to do repairs in the air conditioners as per service report	
2.	Once you've repaired the air conditioners you are expected to commission them and ensure that they are working fine and to the end user's satisfactory	
3.	This is a CIDB 1 ME Work and proof of two previous similar work done must be attached	
4.		
5. QUALITY STANDARD	OHS Act and SANS	
UNIT OF MEASURE OR PACKAGING I.E. (UNIT/BOX/ROLL/PACK/BAIL ETC)		
SAMPLE REQUIRED (YES/NO) IF YES WHEN AND HOW?		NO
ADDENDUM TO SPECIFICATION ATTACHED (YES OR NO)		Yes, service report attached

SPECIFICATION APPROVED BY

Name of End-user (in full)	B. M. Nkomo	Name of SCM Rep (in full)	S. M. MADDINDI
Designation / Rank (in full)	Chief Architect	Designation/ Rank (in full)	Project Supervisor
Signature		Signature	
Date	25/09/2025	Date	26/09/2025

Bidder Initial here _____



ENQUIRIES: B.M NKOSI
EXT NO: 8215

AFTER SERVICE REPORT OF HOSPITAL AIR CONDITIONERS

NO	SECTION	REPORT	QUANTITY	AMOUNT
1.	GATEWAY CLINIC	Daytek air conditioner no gas – Regas	1	
2.	MOTHER'S WAITING ROOM	Window wall. 9000BTU. Replace conditioners. Make: _____	3	
3.	PHIOTHERAPY	Alaska 18000BTU air conditioner. no remote, PC Board blown, no gas. Replace air conditioner Make: _____	1	
4.	HRD OFFICE	9000BTU. Replace air conditioner Make: _____	1	
5.	OLD SERVER ROOM	9000 BTU Replace air conditioner	1	
6.	HR PRACTITIONER	24000BTU Replace air conditioner	1	
7.	FINANCE	Samsung 9000BTU – Replace Filters	1	
8.	HR PRINCIPAL	12000BTU. Replace air conditioner	1	
9.	MANAGEMENT OFFICE	Daikin air conditioner. Replace Remote Alaska Air conditioner – Regas	1	
10.	STAFF CLINIC	Alaska air conditioner has vibration on outdoor unit. Remount units and brackets	1	
11.	MATRON'S COMPLEX	Samsung air conditioner. no gas. Regas unit and remount brackets	1	
12.	DR MAMPHO'S OFFICE	9000BTU new installation of air conditioner Make: _____	1	

13.	LABOUR RELATIONS	9000BTU new installation of air conditioner	1	
		Make:		
14.	SWITCHBOARD	18000BTU new installation of air conditioner	1	
		Make:		
15.	PHYSIOTHERAPY	Strip and Remove 12000BTU from kitchen at Physiotherapy and reinstall at maintenance Office	1	
16.	PHARMACY	36000BTU. Replace air conditioner	1	
		Make:		
TOTAL				

KINDLY RETURN ALL DOCUMENTATION WHEN REPAIRING