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KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

KZN Health Intranet

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 AdvertQuote



KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Quotation Advert

Opening Date:

2022-05-25

Closing Date:

2022-06-02

Closing Time:

11:00

INSTITUTION DETAILS

Institution Name: Kwaliagwaza hospital
 Province: KwaZulu-Natal
 Department or Entity: Department of Health
 Division or section: Central Supply Chain Management
 Place where goods / services is required: Kwaliagwaza Hospital
 Date Submitted:

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
 Item Category: KMG 74-22-23
 Item Description: Services
 Cleaning of building and offices at Thubathethu/Melmoth clinic
 Redir em@nts:Signed SBD4
 BCCCI registration certificate
 Workman's completion certificate
 Letter of good standing

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Briefing Session
 Date : 2022-05-30
 Time: 15H00
 Venue: Melmoth/Thubathethu clinic
 QUOTES CAN BE COLLECTED FROM: Kwaliagwaza Hospital
 SCM Office Kwaliagwaza Hospital
 QUOTES SHOULD BE DELIVERED TO: Kwaliagwaza 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. Mbokezi

Finance Manager 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: thams-inda.mas-arigo@kznhealth.gov.za
 www.kznhealth.gov.za

St Mary's KwaMagwaza Hospital
 Supply Chain Management

Enquiries: Thoba Zulu
 Date: 25 May 2022
 Tel. no.: 035 450 8258
 Ref.no: KMG 74-22-23

INVITATION TO QUOTE

ATT: SERVICE PROVIDER
 FROM: KWAMAGWAZA HOSPITAL
 RE: CLEANING OF BUILDINGS AND OFFICES AT MELMOTH/THUBALETHU CLINIC
 FOR 6 MONTHS

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

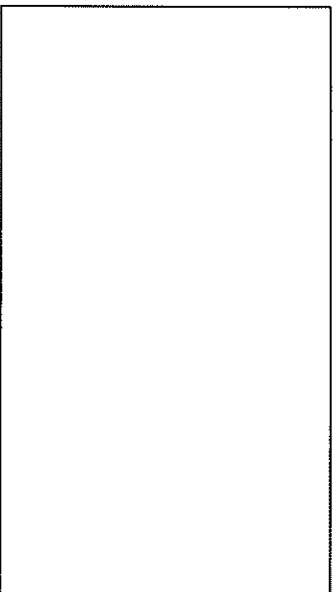
NO.	ITEM DESCRIPTION	QUANTITY	PRICE		COMPLIANT TO SPECIFICATION	
					YES	NO
1	Cleaning of building and Offices Melmoth Thubalethu	Employee 02 01				
SCM REQUIRED DOCUMENTS TO BE ATTACHED						
DOCUMENTS REQUIRED			YES	NO		
1. Signed SBD4						
2. BCCCI registration certificate						
3. Workemenn's completion certificate						
4. UIF Certificate						
5. Letter of good standing						

TO BE SIGNED BY THE SUPPLIER UPON COMPLETION:

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:



• KINDLY RETURN ALL DOCUMENTATION WHEN REPLYING