

Quotation Advert

Opening Date: Closing Date: Leave-90-94 D 2022-01-16 INSTITUTION DETAILS Institution Name: Ekuhlengeni psychiatric hospital Frovince: KwaZulu-Natal Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required Ekuhlengeni psychiatric HOSPITAL Date Submitted Date Calegory: Services Date Calegory: Services Date Outline Description: Date Clear New Ciclar viol or Roual Approved Security Fencins Including Posts. Date Clear New Ciclar viol or Roual Approved Security Fencins Including Posts. Date Compulsory Site Visit Date : Date			
Closing Time: 11:00 INSTITUTION DETAILS Institution Name:	Opening Date:	2022-09-16 MY 2022-09-16	<u> </u>
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Institution Name: Ekuhlengeni psychiatric hospital Province: KwaZulu-Natal Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required Date Submitted Date Category: Services Date Submitted Date Submit	Closing Time:	11:00	
Province: KwaZulu-Natal Department or Entity: Department of Health Central Supply Chain Management Place where goods / services is required EKUHLENGENI PSYCHIATRIC HOSPITAL Date Submitted 2022-09-42 (MP) 1 S	INSTITUTION DETAILS		
Department of Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required EKUHLENGENI PSYCHIATRIC HOSPITAL Date Submitted 2022-09-12	Institution Name:	Ekuhlengeni psychiatric hospital	
Division or section: Central Supply Chain Management Place where goods / services is required Date Submitted Date Submitte	Province:	KwaZulu-Natal	
Place where goods / services is required EKUHLENGENI PSYCHIATRIC HOSPITAL Date Submitted 2692-09-12 0000 70 0 7 0 7 0 7 0 7 0 7 0 7 0 7 0	Department or Entity:	Department of Health	
Date Submitted ### CATEGORY AND DETAILS Quotation Number: ZNQ: ZNGEPH163/2022/23	Division or section:	Central Supply Chain Management	
ITEM CATEGORY AND DETAILS Quotation Number: ZNQ: ZNQEPH163/2022/23 Item Category: Services REMOVE EXISTING PALISADE FENCING, SUPPLY & INSTALL 44 METRES CLEAR VIEW (CLEAR VU OR EQUAL APPROVED SECURITY FENCING INCLUDING POSTS. REQUIREMENTS: CIDB - GB / SG QUALIFICATION OF ARTISAN PROOF OF INSTALLATION OF WINDOWS & WORKPLAN Quantity (if supplies) COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Compulsory Site Visit Date: 10H00 SCM DEPARTMENT QUOTES CAN BE COLLECTED FROM: WILL BE AVAILABLE ON SITE QUOTES SHOULD BE DELIVERED TO: COAST ROAD UMBOGINTWINI 4125 ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: Name: Ms FF Maphumulo Email: Gaith.maphumulo@kznheaith.gov.za Contact Number: G31 - 905 4775/6 Finance Manager Name: Mrs J. Reddy	Place where goods / services is required	EKUHLENGENI PSYCHIATRIC HOSPITAL	
Quotation Number: ZNQ: ZNQEPH163/2022/23	Date Submitted	2022-09-12 MH 15 09 2072	lie.
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COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Compulsory Site Visit 2022-09-16 PPP 2022-09-1-21 Time: 10H00 SCM DEPARTMENT QUOTES CAN BE COLLECTED FROM: WILL BE AVAILABLE ON SITE QUOTES SHOULD BE DELIVERED TO: COAST ROAD UMBOGINTWINI 4125 ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: Name: Ms FF Maphumulo Email: faith.maphumulo@kznhealth.gov.za Contact Number: 031 - 905 4775/6 Finance Manager Name: Mrs J. Reddy Mrs J. Reddy	Item Description:	CLEAR VIEW (CLEAR VU OR EQUAL APPROVED SECURITY FENCING INCLUDING POSTS. REQUIREMENTS: CIDB - GB / SG QUALIFICATION OF ARTISAN	
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De New -	Contact Number:	031 - 905 4775/6	
Finance Manager Signature:	Finance Manager Name:	Mrs J. Reddy	
	Finance Manager Signature:	IN NOW	

No late quotes will be considered