



**Quotation Advert**

**Opening Date:** 05/07/2024  
**Closing Date:** 17/07/2024  
**Closing Time:** 11:00

**INSTITUTION DETAILS**

**Institution Name:** Prince Mshiyeni Memorial Hospital  
**Province:** KwaZulu-Natal  
**Department of entity:** Department of Health  
**Division or section:** Supply Chain Management  
**Place where goods/**  
**Service is required:** Prince Mshiyeni Memorial Hospital  
**Date Submitted:** 05/07/2024

**ITEM CATEGORY AND DETAILS**

**Quotation number:** ZNQ/PMM/221/24/25  
**Item Category:** Services  
**Item Description:** Pest control services for PMMH for a period of 12 months

**NB1: PREFERENCE POINTS WILL BE ALLOCATED ACCORDING TO THE IMPLEMENTATION OF SPECIFIC GOALS IN TERMS OF PPR 2022:**

- **GENDER – FULL/PARTIAL/COMBINATION OF POINTS MAY BE ALLOCATED TO COMPANIES AT LEAST 51% OWNED BY BLACK WOMEN.**

**NB2: CONTRACTORS MUST PROVIDE VALID P.NUMBER CERTIFICATE FROM AGRICULTURE**

- **CONTRACTORS MUST PROVIDE VALID LETTER OF GOOD STANDING FROM LABOUR: NATURE OF BUSINESS PEST CONTROL**

**COMPULSORY BRIEFING SESSION / SITE VISIT**

**Select Type:** Complusory Briefing  
**Date :** 11/07/2024  
**Time :** 09:30am  
**Venue:** Auditorium Hall

**Quotation document will be available on site meeting Date: 11/07/2024, Time: 09:30am. Late companies will not be allowed to attend Site Meeting.**


**QUOTES CAN BE DELIVERED TO: PMMH on tender box ONLY.**

Telephonic, Telex, Facsimile, Emailed and late quotation will not be accepted.

**ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:**

**Name:** Mr H. Ngcobo  
**Email:** Hloniphani.Ngcobo@kznhealth.gov.za  
**Contact number:** 031 907 8214  
**Finance Manager Name:** Mr. C.D Zuma

Finance Manager signature:



A handwritten signature in black ink, consisting of several loops and a long horizontal stroke at the end, positioned above a solid horizontal line.