Quotation Advert

Opening Date:	11-02-2021
Closing Date:	18/02/2021
	11:00
Closing Time:	
nstitution Details	And the state of t
nstitution Name:	Bruntville CHC
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Diage where goods / services is	Bruntville CHC. Old Main Road Mooi
One Submitted	11-02-2021
tem Category and Details	
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Quotation Number:	BCHC: 70/20/21
	markets the fact representation of the contract of the contrac
tem Category:	Goods SERVICING OF VACCUM PUMP AT BRUNTVILLE CHC
	REQUIREMENTS: -Bidder to have (CIDB GRADE 1: ME)
	-PROOF OF PREVOUIS WORK DONE IN THE SAME
Item Description:	FIELD MUST BE ATTACHED ON THE DOCUMENT
	-SAFETY PLAN - SUPPLIER TO PROVIDE REGISTERED PROOF OF
	LIABILITY COVER INSURANCE FOR THE COMPANY
	·
	·
Quantity (if supplies)	01
, , , , ,	
Compulsory Briefing Session / ತ್ವ	site visit :
Select Type:	Select Compulsory site meeting
Date :	16-02-202
Time	11:00 BCHC BOARDROOM, BRUNTVILLE CHC, OLD MAIN ROAD, MOOI RIVER, 3300
Venue-	BURE BOARDROOM, BROWN TILLE CHE, OLD WARM ROAD, WICH, 5340
Quotes can be collected from:	BCHC BOARDROOM, BRUNTVILLE CHC, OLD MAIN ROAD, MOOI RIVER, 3300
Quotes should be delivered to:	TENDER BOX NEXT TO SECURITY GATE, BRUNTVILLE CHC, OLD MAIN, ROAD, 33
Enquiries regarding the advert r	nay be digected to:
. •	in the second se
Name:	Mr B.E MADUNA
Marrie. Email:	bulelani.maduna@kznhealth.gov.za
Contact Number:	↑ 033 2631 545
	Mr L. Kauleza
Finance Manager Name:	WI L. MANGE
•	/
Finance Manager Signature:	At the
Finance manager dignature.	Th
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No late quotes will be considered

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Name:	Mr B.E MADUNA
Email:	bulelani.maduna@kznhealth.gov.za
Contact Number:	(033 2631 545
Finance Manager Name:	Mr L. Kauleza
	1/M
Einanca Manager Signature:	J+H~
Finance Manager Signature:	44
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