THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH



PHARMACY COUNCIL

NOTIFICE FOR CHANGE OF MANAGEMENT OR PHARMACEUTICAL PERSONNEL OF A PHARMACY

(Regulation 17(1) of The Pharmacy (Pharmacy Practice and the Conduct of Business of Pharmacy) GN No. 267)

Changes to be Made: Superintendent Other Pharmaceutical Personnel	
A. TO BE COMPLETED BY THE SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL AND OWNER OF THE PHARMACY. A.1. DETAILS OF THE PHARMACY Name of the Pharmacy AAA257.	
Name of the Pharmacy	LAAN
A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL Full NamePlNPhone AddressPmailPhone	
A.3. REASON(s) FOR CHANGE ASSIGNMENT OF PERSON EL	
Time frame of notification: (As per Contract) 7 clay S. Signature 15 August 25	
A.4. OWNER'S DETAILS Full Name	
B. TO BE COMPLETED BY THE OWNER ONLY	
B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL Full Name HAPPY DISMAS BUSINGPIN. Phone Number 0747927661. Email happydusmad eg mail Physical address: Street. MBE21 LWS Ward MBE21 District/Municipal WB LWGO Region DAR ES - SALAAM Details of Previous pharmacy: Name of Pharmacy. FIN. District/Municipal Region.	
B.2. QUALIFICATION DOCUMENTS OF THE NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL (To be attached) (i) Copies of registration certificate and valid license to practice (ii) Contract Agreement/MOU (iii) Commitment Letter	
C. FOR OFFICIAL USE ONLY	
INSPECTION/REGISTRATION OR ZONAL OFFICE	
RecommendationsDesignationSignatureDate	
D. NOTE; Failure to acquire the services of another superintendent/ Other Pharmaceutical Personnel within the mentioned time frame, shall lead to immediate closure of the premises as per Section 43 of the Pharmacy Act Cap 311.	
NB: Other pharmaceutical personnel mean any pharmaceutical personnel apart from superintendent.	

WIZARA YA AFYA, MAENDELEO YA JAMII, JINSIA, WAZEE NA WATOTO



BARAZA LA FAMASI



FOMU YA KUKIRI KUTEKELEZA MAJUKUMU YA MWANATAALUMA WA DAWA KWENYE MAJENGO YA KUTOLEA HUDUMA YA DAWA (kutoka katika Kifungu No. 44 (1) (a) cha Sheria ya Famasi)

SEHEMU TA KWANZA: - TAARIFA ZA MWANATAALUMA
☐ MFAMASIA ☑ FUNDI DAWA SANIFU ☐ FUNDI DAWA MSAIDIZI ☐ PHARM. DISP
1. Jina la mwanataaluma. HAPPY, PSNAS BUSONGO PIN 04-07-338
2. Namba ya simu 07.47927661 barua pepe happydismas 2110gmauli co
3. Tarehe ya mwisho kuhuisha jina (Retention)14 \2 (ROR 5
4. Je, umehuisha taarifa zako kwenye mfumo kupitia tovuti ya baraza la famasi?
(http://196.45.42.57/pcmis_data/view/modules/registration/pharmacist-
signup.php)
SEHEMU YA PILI: - KUKIRI KWA MWANATAALUMA:
Mimi HAPPY DISMAI BUSONGO mwenye
taaluma ya dawa ngazi yaDIPLOMA nakiri kwamba nitafanya
kazi yangu ya kitaaluma katika jengo la kutolea huduma ya dawa liitwalo
BELFAST PHARMACY FIN Illilopo katika
Wilaya ya KINONDONI Mkoani DAR ES SALAAM
Sahihi H. Jaus . Tarehe 14, 8, 2025
Uthibitisho wa Mfamasia wa Halmashauri
Nadhibitisha kwamba mwanataaluma tajwa ni miongoni/ si miongoni mwa
wanataaluma waliopo katika halmashauri ninayosimamia Muhuri KNY:
DMO
Jina na Sahihi Ofur Strat Galany Tarehe /S/08/25
SEHEMU YA TATU: - LITHIRITISHO WA MAKAZI HALMASHAIRI WA MANISDA A
THE TAX TA MANISPAA YA KINUNOGI J
Ithibitishwe na: Afisa Mtendaji
Jina la mtendaji (Kata). CEGLIA S KILLBA Kata ya MREZMANRIA
Nathibitisha kwamba Ndugu HAPPY . D. BUJO NGO anajshi Marun
langu mtaa/kijiji. M8ERI Euris ,kuanzia mwaka
Sahihi Afisamtendaji Tarehe
14.08.2025
MBEZI



THE UNITED REPUBLIC OF TANZANIA PHARMACY COUNCIL





LICENSE TO PRACTICE

The Pharmacy Act

(Made under Sect.26 of The Pharmacy Act No. 1 of 2011)

I Hereby Certify that

HAPPY DISMAS BUSONGO

PIN NO: 0407338

Having complied with the provision of Section 26 of The Pharmacy Act, Cap 311
is entitled to practice as a **Pharmaceutical Technicians** upon the terms and subject to the conditions set forth in the aforesaid Act and its Regulations thereto.

Issued:26 September 2023

Expires on:31 December 2025

Registrar Pharmacy Council





AUNCEMENT FOR EMPLOYMENT OF PHARMACEUTICAL TECHNICIAN
This Agreement is made on this day of 08 20 2
BETWEEN
(hereinafter referred to as the PROPRIETOR) the expression which includes his assignees, agents or his legal representative of his business.
AND
who will perform all the technical activities in the Pharmaceu under pharmacist supervision (hereinafter referred to as the Pharmaceutical Technician).
WHEREAS the Proprietor operates a business of a pharmacist which is a regulated business under the Act.
WHEREAS in compliance with the Pharmacy "Pharmacy Practice" Regulation, 2012 the Proprietor wishes to engage the professional services of a Pharmaceutical Technician to his business,
WHEREAS the Pharmaceutical Technician is willing to offer professional services to the proprietor in lieu of remuneration for such services or such other terms and conditions as stipulated hereunder;
WHEREAS the proprietor and Pharmaceutical Technician are desirous to enter into an agreement, to support operation of a business of a pharmacist.
WHEREAS in the event that the superintendent pharmacist is part time available, the Pharmaceutical Technician shall be available at full time at the terms and conditions as hereinafter appearing;
WHEREAS the Parties agree to operate a business of a pharmacist styled as Pharmacy.
AND NOW WHEREFORE THIS AGREEMENT WITNESSED AS FOLLOWS;
Interpretation: "Act" means the Pharmacy Act, Cap 311.
"Agreement" means the Agreement between the parties to operate a business of Pharmacist.
"Business of pharmacy or pharmacist" includes professional pharmacy practice and any activity carried on by a person in relation to medicines, medical devices or herbal medicines;
"Pharmacy" means any approved premises wherein or from which any services pertaining to the practice of a pharmacist is provided, and shall include a community Pharmacy, consultant

Pharmacy, institutional Pharmacy or wholesale Pharmacy.

1.

"Proprietor" means an owner of Pharmacy and includes his assignees, agents or his legal representative.

"Superintendent" means a pharmacist in charge of the business of a pharmacist

"Pharmaceutical Technician" means a person enrolled as such under section 23 of the Act.

"Transfer of ownership" means any disposition of ownership of the facility subject of this agreement to a third party either by way of sale, lease, or any other form, which has the effect of changing or transferring power of authority of owning of pharmacy to a third person during existence of its operation

2.	Manmadian	-8	A
dia u	Durauon	OI	Agreement

This	Agreement	shall	be	effective	for	a	period	of	twelve	(12)	months.	commer	ncina	from
the_	15	day	of_	August	2()	25	tc	15			Gusi 20		

3. Commencement of Supervision

The	Pharmaceutical	Technician	shall	commence	technical	assistance	of	the	ahove	named
Phar	macy on the		y of	08 2	0 25		91		40000	named

4. Obligation of the Parties:

4.1 The Proprietor:

The proprietor shall have the following duties and responsibilities; -

- 4.1.1 The PROPRIETOR shall pay Monthly salary/emoluments of TZS. 350,000/- payable monthly to the PHARMACEUTICAL TECHNICIAN upon discharging his duties and functions as per this Agreement. At any event, the salary shall not be paid in advance.
- 4.1.2 The salary/emoluments shall be net of any applicable taxes and/or deductible employment benefits and shall be paid monthly and no later than the 1st day of the following month.
- 4.1.3 Comply with the Laws, Regulations, Guidelines and standards prescribed by the Pharmacy Council and other relevant authorities.
- 4.1.4 Implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in high level at all times.
- 4.1.5 Hire other pharmaceutical personnel for providing services or dispensing personnel recognized by the Pharmacy Council.
- 4.1.6 Apply adequate funds necessary to rehabilitating or modifying the present premises and maintaining the modern pharmacy practice.

[&]quot;Pharmacist" means a person registered as such under section 16 of the Act.

- 4.1.7 Follow up and implement on matters advised by a Pharmaceutical Technician and approved by Superintendent on professional and matters related to provision of good pharmaceutical services.
- 4.1.8 Shall ensure pharmaceutical services are provided with due care.
- 4.1.9 Shall ensure all proper records are maintained and managed well.
- 4.1.10 Shall ensure the use of reference and other relevant materials whenever necessary for provision of pharmaceutical services and operations.
- 4.1.11. Shall report to the Pharmacy Council on poor attendance, service provided or malpractices done by the Pharmaceutical Technician.
- 4.1.11 Shall purchase and ensure availability of all necessary tools for pharmacy operations are in place, i.e Superintendent log book, PC logo, dispensing register, ledgers etc.
- 4.1.12 Shall not interfere with the performance of professional matters in the premises or cause non-performance of professional services in the pharmacy.
- 4.1.13 Shall ensure all purchases or procurement and deliverables of pharmacy items are signed by a superintendent.
- 4.1.14 Perform any other duty as the Council may determine from time to time.

4.2 The Pharmaceutical Technician;

At a salary or emolument stipulated in clause 4.1.1 of this Agreement, the Pharmaceutical Technician shall, with all commitment and professional diligence, take the necessary steps to establish and efficiently perform the duties according to their scope of practice to the said pharmacy, dealing in Pharmaceuticals.

The Pharmaceutical Technician under personal supervision of a pharmacist Shall have the following duties and obligations: -

- 4.2.1 Shall implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in high level at all times.
- 4.2.2 Shall ensure services are provided are provided under his/ her physical supervision.
- 4.2.3 Shall manage and undertake all technical and professional matters in the pharmacy under supervision of a pharmacist.
- 4.2.4 Shall facilitate capacity building to all pharmaceutical personnel that supervises the pharmacy.
- 4.2.5 Shall provide pharmaceutical service with due care.

- 4.2.6 Shall ensure all proper records are maintained and managed in accordance to good pharmacy practice standards.
- 4.2.7 Shall ensure all availability of all necessary reference and other relevant materials necessary for provision of pharmaceutical services and operations are in place.
- 4.2.8 Shall report to the Pharmacy Council on any malpractices or violations done by the Proprietor.
- 4.2.9 Shall ensure all availability of all necessary tools for pharmacy operations are in place.
- 4.2.10 Must ensure that whoever is on duty shall appear on a white coat and name tag on it.
- 4.2.11 Shall ensure all certificates (Business permit, premise registration, copy of certificates of pharmaceutical personnel any other certificates from other are conspicuously displayed in the premises.
- 4.2.12 Shall ensure medicines, medical supplies and other pharmacy items are properly arranged and kept in compliance with good pharmacy practice standards.
- 4.2.13 Shall perform any other duty as the council may determine.

5. Termination

Unless otherwise terminated by either party, this Agreement shall be terminated upon expiry of the contract.

This agreement may be terminated by mutual agreement between both parties and or any party upon issuing a written notice of three (3) months to the other party of his intention to terminate this contract

The written notice shall be addressed to the other part and copy shall be submitted to the Registrar, Pharmacy Council for notification.

Notification of termination of the contract to the Registrar shall be accompanied with reasons of termination.

The Parties agree that the Council shall not be obligated to issue another notice of termination but a closure order as per the Act.

6. Dispute Settlement

6.1 In the event of dispute in connection with this agreement both parties will make every effort to resolve the matter amicably.

- 6.2 If amicable settlement becomes impossible, then, an aggrieved party may seek legal remedy.
- 6.3 Nothing in clause 6 (6.1) and (6.2) shall prevent the Proprietor or Pharmaceutical Technician from initiating or proceeding to The Commission for the Mediation and Arbitration (CMA).

7. Costs

The Proprietor shall meet the cost of drawing up this Agreement.

- **8.** The laws of Tanzania hereto shall govern the validity, construction and interpretation of this agreement and the rights and duties of the parties.
- 9. The Pharmacy Council will accept additional clauses but this Agreement is a generic contract for guidance only.

IN WITNESS WHEREOF the parties hereto have duly signed and sealed this presents on the date and in the manner herein after appearing.

Signed and delivered by the parties at this // day of 20 21 SIGNED and DELIVERED By the said. AENE BPDUNOWA Who is known to me personally/. Introduced to me by badundwa This day of 20 2/ PROPRIETOR In the presence of: Name: MASINDIA MORILE Designation: ADNOCATE Signature: Date: 15 log 20 2 5 SIGNED and DELIVERED By the said. HPPPY DISMAS. Who is known to me personally/.
By the said. RENE BPDWOWA Who is known to me personally/
Who is known to me personally/ Introduced to me by the latter known to me personally This day of 20 PROPRIETOR PROPRIETOR PROPRIETOR Signature: No. 10 (ATL) Signature: 15 log 20 2.5 SIGNED and DELIVERED By the said. HPPPY DISMAS
Introduced to me by the latter known to me personally This
This
In the presence of: Name: MASTIDIA MORILE Designation: ADVOCATE Signature: Mastide Date: 15 / 08 / 20 2 5 SIGNED and DELIVERED By the said. HAPPY DILMAL
In the presence of: Name: MASTIDIA MORILE Designation: ADVOCATE Signature: Mastide Date: 15 / 08 / 20 2 5 SIGNED and DELIVERED By the said. HAPPY DILMAL
Name: MASTIDIA MORILE Designation: AD 10 CATE Signature: NETONO Date: 15 log 2025 SIGNED and DELIVERED By the said. HAPPY DILMAS
Designation: AD.V0.CATE Signature: Manage Date: 15 log 20.25 SIGNED and DELIVERED By the said. HPPPY DISMAS
Signature: No. 100 20.25 Signed and Delivered By the said. HPPPY DISMAS
SIGNED and DELIVERED By the said. HPPPY DISMAS
SIGNED and DELIVERED By the said
By the said
By the said
By the said
Who is known to me personally/
Introduced to me by
the latter known to me personally
This day of Q PHARMACEUTICAL
TECHNICIAN
In the presence of:
Name: MASTIDIA MORILE
Designation: ADVCATE
Signature:
Date: 16 8 2021
W. S. V. THEN V.
The second secon