

## AGREEMENT FOR EMPLOYMENT TO OPERATE A BUSINESS OF A PHARMACIST

This Agreement is made on this 10 day of 02 2025

### BETWEEN

COLETHA MODESTA (Name) of P.O.BOX 30 Region MAGU-MWANZA  
(hereinafter referred to as the **PROPRIETOR**) the expression which includes his assignees, agents or his legal representative of his business.

### AND

MAROS GODFREY MAROS a registered pharmacist in charge who supervises a business of a pharmacist (hereinafter referred to as the **SUPERINTENDENT**).

**WHEREAS** the Proprietor wishes to establish and operate a business of a pharmacist which is a regulated business under the Act

**WHEREAS** in compliance with section 43 of the Act the Proprietor wishes to engage the professional services of a pharmacist to be in charge of his business,

**WHEREAS** the Superintendent 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 superintendent are desirous to enter into an agreement, to establish and operate a business of a pharmacist at the terms and conditions as hereinafter appearing;

**WHEREAS** the Parties agree to establish and operate a business of a pharmacist styled as SENYA Pharmacy.

### AND NOW WHEREFORE THIS AGREEMENT WITNESSETH AS FOLLOWS;

#### 1. Interpretation:

"Act" means the Pharmacy Act, Cap 311.

"Agreement" means the Agreement between the parties to establish and 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.

"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

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 Superintended 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 10<sup>th</sup> day of February 2025

### SIGNED and DELIVERED

By the said.....COLETHA

MODESTA

Who is known to me personally/.....

Introduced to me by.....

.....the latter known to me personally

This.....10<sup>th</sup> day of.....Feb 2025

In the presence of:

Name:.....

Designation:.....

Signature:.....

Date:.....

KATORO GEITA.

### SIGNED and DELIVERED

By the said.....MAROS

GODFREY MAROS

Who is known to me personally/.....

Introduced to me by.....

.....the latter known to me personally

This.....10<sup>th</sup> day of.....February 2025

In the presence of:

Name:.....

Designation:.....

Signature:.....

Date:.....

MAHAKAMA YAMWANZO  
KATORO GEITA.

PROPRIETOR

SUPERINTENDENT



THE UNITED REPUBLIC OF TANZANIA

THE PHARMACY COUNCIL 00002616

**CERTIFICATE OF FULL REGISTRATION***(Section 20 of the Pharmacy Act, CAP. 311)*Full Name Masros G. Masros

\* I hereby certify that the following is a true extract from the entry in the Register relating to fully registered pharmacist details in respect of whom are set out below.

Registration		Date of Birth	Nationality	Address	Qualification	Place and Date of Qualification
PIN	Date					
0103897	20th November, 2024	25th March, 1988	Tanzanian	P.O. Box 143 Mwanza	Bachelor of Pharmacy	Catholic University of Health and Allied Sciences 2021

Date 19th December, 2024
  
REGISTRAR

- NOTES:** (1) This certificate affords immediate evidence of registration. In due course the name of the Pharmacist will be published in the list of registered Pharmacist published annually by the Council and reference should thereafter be made to the current Published list for evidence as to continue registration.
- (2) This Certificate is not an evidence of the identity of its holder of the named above and must not be used as such.

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 YA KWANZA: - TAARIFA ZA MWANATAALUMA

☒ MFAMASIA ☐ FUNDI DAWA SANIFU ☐ FUNDI DAWA MSAIDIZI ☐ PHARM. DISP

1. Jina la mwanataaluma. Maros Godfrey Maros PIN 0103897
2. Namba ya simu. 0682041423 barua pepe maros.godfrey@gmail.com
3. Tarehe ya mwisho kuhuisha jina (Retention) 5/12/2024
4. Je, umehisha taarifa zako kwenye mfumo kupitia tovuti ya baraza la famasi?

(<http://196.45.42.57/pcmis.data/view/modules/registration/pharmacist-signup.php>) ☒ NDIYO, Stakabadhi Na. GWX10131853849 ☐ HAPANA

SEHEMU YA PILI: - KUKIRI KWA MWANATAALUMA:

Mimi. Maros Godfrey Maros mwenye  
taaluma ya dawa ngazi ya Shahada nakiri kwamba nitafanya  
kazi yangu ya kitaaluma katika jengo la kutolea huduma ya dawa litwalo  
SENYA PHARMACY FIN 010251898 lililopo katika  
Wilaya ya Geita DC Mkoani Geita  
Sahihi Maros Tarehe 10/2/2025

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 Simon E. Kalunga Tarehe 11/02/2025

SEHEMU YA TATU: - UTHIBITISHO WA MAKAZI:

Ithibitishwe na: Afisa Mtendaji

Jina la mtendaji (Kata) NAOMI MASONA Kata ya LUDETE

Nadhibitisha kwamba Ndugu MAROS GODFREY MAROS anaishi  
langu mtaa/kijiji KALFONIA kuanzia mwaka 2022

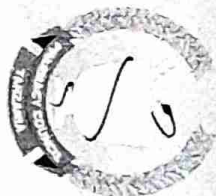
Sahihi Afisamtendaji

Tarehe

11/02/2025

Muhuri  
Mtendaji

MUHURU YA WILAYA  
AFISA MTENDAJI NA KATA  
LUDETE  
GEITA



### Pharmaceutical Personnel Validator

\* PIN

0103897

Check to verify  
PIN



Name

Description

Photo:



PIN:

0103897

Personnel Name:

Maros G Maros

Category:

Full Registered Pharmacist

Superintendent at:

Not Assigned

Pharmaceutical Personnel at:

Not Assigned

Phone Number:

0755988671

Email Address:

marosgodfrey04@gmail.com

Region:

Mwanza

District:

Nyamagana

Ward:

Pamba

Physical Location:

KILIMAHWA- STREET, USHIROMBO -WARD, BUKOMBE- DISTRICT

Personnel Status:

Registered

Date of Registration:

20-11-2024