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PHARMACY COUNCIL RECEIVED PCF.14 03 APR 2025 P.O. Box 1277, DODOMA

PHARMACY COUNCIL

APPLICATION FOR ALTERATION
(Under Section 35 (1) of Pharmacy Act, 2011)

Registrar,
Pharmacy Council,
P.O. Box 1277,
Dodoma.

APPLICATION FOR CHANGE OF:

1. PREMISES LOCATION ☐
2. BUSINESS NAME ☑
3. BUSINESS OWNERSHIP ☑

SECTION A: APPLICANT CURRENT INFORMATION:

NAME OF PREMISES: AVOCADO PHARMACY FIN. 0102419

TYPE OF BUSINESS: Retail Pharmacy ☑ Wholesale Pharmacy ☐ Warehouse ☐

PHYSICAL ADDRESS:

Plot No. ..... Street: BOCHELA Ward. NKUHUNGU

District/Municipal. DODOMA Region: DODOMA.

POSTAL ADDRESS: ..... Contact. No. 0764196574

E-mail: trsombera@gmail.com.

OWNERSHIP:

Directors (Names): 1. — Qualification: .....

2. ..... Qualification: .....

3. ..... Qualification: .....

SUPERINTENDANT INFORMATION:

Full Name: TIMBA REUBEN SOMBERA PIN: 0101004

Residential Address: DODOMA Tel: 0764196574 Email: trsombera@gmail.com.

Contract commencement date: 01.07.2024 Cessation date 30.06.2025

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: ST. RAPHAEL PHARMACY

TYPE OF BUSINESS: Retail Pharmacy ☑ Wholesale Pharmacy ☐ Warehouse ☐

PHYSICAL ADDRESS:

Plot No. ..... Street. BOCHELA Ward. NKUHUNGU

District/Municipal. DODOMA Region DODOMA.

POSTAL ADDRESS: 47 DODOMA CONTACT. No. 0672 48 14 13

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. ..... Qualification: .....
2. ..... Qualification: .....
3. ..... Qualification: .....

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: RAPHAEL SAMUEL MOSHA PIN: 0103515

Residential Address: DODOMA Tel: 0672481413 Email: mosharaphael@gmail.com

Contract commencement date: ..... Cessation date .....

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. Expecting to relocate from Dodoma.

2. .....

SECTION D: APPLICANT INFORMATION

Name of Applicant: TIMBA REUBEN SOMEERA

(Contact/email if different from the above)

Address: DODOMA Tel: 0764196574 E-mail: timbera@gmail.com

Signature of Applicant ..... Date 20.09.2024

SECTION E: APPLICANT DECLARATION

I hereby declare to the best of my sanity that the information provided is valid and there are mutual agreements of terms between parties.

Signature of Applicant ..... Date 20.09.2024

SECTION F: REQUIRED ATTACHMENT

Please attach the following documents depending on your proposed changes:

1. TAX CLEARANCE CERTIFICATE
2. Copy of lease agreement or title deed
3. Memorandum of Understanding
4. Certificate of registration from BRELA
5. Copy of Director(s) ID
6. Original Premises Registration Certificate (For Alteration No. 1 or 2)

Form 5

TANZANIA

BRELA
BUSINESS REGISTRATIONS AND LICENSING AGENCY

No. 588660

Certificate of Registration

The Business Names (Registration) Act (Cap 213)

I HEREBY CERTIFY THAT **ST. RAPHAEL PHARMACY** this **5th** day of **NOVEMBER** year **2024** has been duly registered pursuant to and in accordance with the provisions of the Business Names (Registration) Act and the Rules made thereunder, and has been entered the Number **588660** in the Index of Registration.

GIVEN under my hand at Dar es Salaam this **5th** day of **NOVEMBER TWO THOUSAND AND TWENTY FOUR.**

REGISTRAR OF BUSINESS NAMES
TANZANIA

Deputy Registrar Business Names

NOTE – This certificate must be kept in a conspicuous position at the principal place of business. Any change in the particulars originally registered must be notified to the Registrar within twenty eight days.

Form 21

TANZANIA

BRELA
BUSINESS REGISTRATIONS AND LICENSING AGENCY

Extract date and time: 05/11/2024 15:05:47
Registration date and time: 05/11/2024 15:05:34

The Business Names (Registration) Act (Cap 213)

Extract from Register

1.	**Name of Business:**	**ST. RAPHAEL PHARMACY**
2.	**Registration number:**	**588660**
3.	**Principale Place of Business:**	Region Dodoma, District Dodoma, Ward Mnadani, Postal code 41213, BOCHELA KARIBU NA KANISA LA HOUSE OF PRAYER
4.	**Contacts:**	Email mosharaphael@gmail.com, Phone 0672481413, P.O.Box 47
5.	**Business activity:**	8690 - Other human health activities, Main activity
6.	**Propriator/Partners:**	RAPHAEL SAMWEL MOSHA
7.	**Authorized to Operate Bank Account etc:**	RAPHAEL SAMWEL MOSHA

REGISTRAR OF BUSINESS NAMES *TANZANIA*

Deputy Registrar Business Names

Information printed from the Register of Business Names is true and complete as per extract generation date and time. Please be advised to refer to the Online Registration System at BRELA (ors.brela.go.tz) for an up-to-date information regarding given Business Name.

PHARMACY COUNCIL

PREMISES REGISTRATION CERTIFICATE

Made under Section 34 (1) of the Pharmacy Act Cap.311

FIN: 0102419

T is to certify that the premises owned by M/S ***Avocado Pharmacy*** of ***P.O.Box 10, Dodoma*** located at ***Mnada Mpya Street, Nkuhungu, Dodoma CC*** Municipality/District in ***Dodoma*** Region has been registered for ***Retail Only*** to sell pharmaceutical and related products with Facility Identification Number (FIN) ***0102419***

Issued in: ***December 2022***

Expires on: ***30 June 2027***

22-12-2022

DATE:

Pharmacy Council

SIGNATURE OF REGISTRAR AND STAMP

CONDITIONS

1. ***The premises and the manner in which the business is conducted must conform to the category of pharmacist business registered***
2. ***This certificate does not authorize the holder to sell or supply medicines, medical devices and diagnostics illegally to unlicensed premises***
3. ***Any changes such as ownership, superintendent pharmacist, business name, physical address and location of the registered premises shall be approved by the Pharmacy Council***
4. ***This certificate is non transferable to other premises or to any other person***
5. ***Both certificate and business permit shall be displayed conspicuously in the registered premises***

MKATABA

MKATABA WA KUPANGISHA
CHUMBA/VYUMBA/NYUMBA/FREMU/ENEO LA WAZI

MKATABA: maana yake kwa mujibu wa "**SHERIA ZA MKATABA**" ni makubaliano ya hiari kati ya pande mbili zilizohusika kwenye jambo Fulani.

Mwenye nyumba na mpangaji wote tukiwa ni watu wazima wenye akili timamu tunakubaliana kwa hiari yetu kwamba, makubaliano yote yaliyoorodheshwa hapa chini kuanzia ukurasa namba moja (1) mpaka namba nne (4) yaheshimiwe na yatekelezwe kwa vitendo muda wote wa mkataba.

Mkataba huu unafanywa baina ya:

Mwenye nyumba;..HOUSE OF PRAYER (SEKEFE).....

.....

Mpangaji....RAPHAEL SAMWEL MOSHA

TUMEKUBALIANA KWAMBA:

Mwenye nyumba anampangisha..RAPHAEL S. MOSHA

Katika chumba/~~vyumba~~/~~nyumba~~/fremu/ ~~eneo la~~ wazi, iliyopo Mtaa wa..CHILEWA.....Kata ya..NKUHUNGU..... Wilaya ya ..Dodoma..... Mkoa wa..Dodoma.....

Mkataba huu utakuwa niwa muda wa...Miezi Mitatu (3)

Mkataba huu utaanza tarehe ..01/08/2024..... na kumalizika tarehe..31/10/2024.....

Kodi kwa kila mwezi ni **Tshs**..1200,000/= 200,000/=

(kwamaneno).....LAKI MBILI TU.....

.....

Leo tarehe ..01/08/2024..... imelipwa kiasi cha **Tshs**....1,200,000/=.....

(Kwamaneno)....MILIONI MOJA NA .....

.....LAKI MBILI....Ikiwa ni kodi ya....PANGO (FREM)

ANGALIZO

- Mpangaji atawajibika kufuata taratibu zote za upangaji ikiwa ni pamoja na kuhakikisha chumba/ vyumba /nyumba/fremu /eneo la wazi inakuwa katika hali nzuri kwa muda wote wa Mkataba
- Mpangaji atawajibika kulipia gharama zote za umeme, maji na maji taka kulingana na matumizi.
- Mpangaji atawajibika kulipa kifaa chochote atakachoharibu
- Mpangaji haruhusiwi kufanya matengenezo yoyote bila idhini ya maandishi ya mwenye nyumba
- Mpangaji haruhusiwi kumpangisha Mpangaji mwingine bila idhini ya mwenye nyumba
- Mara baada ya Mkataba huu kumalizika Mpangaji atarudisha alichopangishwa kikiwa katika hali nzuri kama alivyokikuta
- Mwenye nyumba na Mpangaji watalazimika kufuata sheria zote za Mkataba
- Mwenye nyumba na Mpangaji atakayeshindwa kufuata masharti ya Mkataba huu itasababisha Mkataba kuvunjwa
- Kusitisha Mkataba ni muhimu kutoa sababu isiyozuilika kwa pande zote
- Mabadiliko yoyote ya Mkataba huu yanatakiwa kutolewa katika kipindi cha mwezi mmoja (siku 30) kabla ya Mkataba huu kuisha
- Lugha za matusi,kero,dharau,bugudha kwa majirani hairuhusiwi
- Mlundikano wa watu hairuhusiwi
- Mwenye nyumba anatakiwa kulinda na kuheshimu haki ya Mpangaji kwa muda wote wa Mkataba
- Mkataba huu ukiisha kodi ya pango itapanda kutoka

Tshs.....(Kwamaneno).....

.....

Na kufikia **Tshs.....(Kwamaneno).....**

.....

MUHIMU

Pia tunakubaliana kwamba Mkataba huu unaweza kutumika mbele ya sharia au ofisi ya serikali ya mtaa au mahakamani kwa ajili ya maamuzi ikiwa kutatokea kutokuelewana.

HIVYO LEO TAREHE 01/08/2024 **PANDE ZOTE MBILI ZITATIA SAINI MKATABA HUU.**

MWENYE NYUMBA

JINA: HOUSE OF PRAYER (SOFCT)

TAREHE 01/08/24 **SIMU:** 0769963196

SAHIHI: K. Rubili

SHAHIDI (1)

JINA:.....

TAREHE:.....**SIMU:**.....

SAHIHI:.....

SHAHIDI(2)

JINA:.....

TAREHE:..... **SIMU:**.....

SAHIHI:.....

MPANGAJI

JINA RAPHAEL SAMWEL MOSHA

TAREHE 01/08/2024 SIMU 0672481413

SAHIHI Mosha

SHIHIDI WA MPANGAJI

JINA Neema Samwel Mosha

TAREHE 01/08/2024 SIMU 0767180582

SAHIHI

MAWASILIANO

Endapo mpangaji amepatwa na matatizo ya ghafla kama ugonjwa, kifo, makataba ukiwa umeisha wakati yeye hayupo wataarifiwe hawa wafuatao;

JINA NEEMA MOSHA SIMU 0767180582

JINA SIMU

KAMISHNA WA VIAPO

JINA

TAREHE

SAHIHI

TANZANIA REVENUE AUTHORITY

CERTIFICATE OF REGISTRATION
FOR
TAXPAYER IDENTIFICATION NUMBER (TIN)

(ISSUED UNDER SECTION 23 OF THE TAX ADMINISTRATION ACT 2015)

THIS IS TO CERTIFY THAT

RAPHAEL SAMWEL MOSHA

HAS BEEN REGISTERED WITH THE TANZANIA REVENUE AUTHORITY AND ASSIGNED THE TAXPAYER IDENTIFICATION NUMBER

135-781-444

WITH EFFECT FROM: **08 TH FEBRUARY 2018**

TRA LOCATION: **DODOMA** TAX OFFICE: **DODOMA**

PHYSICAL LOCATION:

STREET / AREA: **KIKUYU - IMAGE**

HERBERT M.T KABYEMELA
COMMISSIONER FOR DOMESTIC REVENUE

NOTE: THE REQUIREMENTS UNDER WHICH THIS CERTIFICATE IS ISSUED ARE STATED OVERLEAF

TANZANIA REVENUE AUTHORITY

ISO 9001: 2015 CERTIFIED

TAX CLEARANCE CERTIFICATE

(Issued Under Regulation 103 of Tax Administration (General) Regulations, 2016)

Licencing Authority; TIN : 125-847-269
PHARMACY COUNCIL
MWENGE
31818
DAR ES SALAAM

Tax Certificate Number:
161-0216-3795

Issuing Office: Dodoma
Telephone: 026 23222912
Date of issue: 23 September 2024
Expiry Date: 31 December 2024

Taxpayer Name	**TIMBA REUBEN SOMBERA**		
Trading Name			
Taxpayer Identification Number	**127-183-236**	Vat Registration Number	
Company Registration Number			

Business Premises located at :
REGION : DODOMA,
DISTRICT : DODOMA,
STREET : MNADANI

This is to certify that the above registered Taxpayer has complied with tax laws and has been granted Tax Clearance Certificate with respect to the following business(es):

1	Retail sale of pharmaceutical and medical goods, cosmetic and toilet articles in specialized stores

Alfred T. Mregi
COMMISSIONER FOR DOMESTIC REVENUE
23 September 2024

Disclaimer :

1. This certificate is issued free of charge
2. This certificate should be tendered in its original form and it is valid only if it is embossed with QR Code
3. This Tax Clearance Certificate shall not preclude the Commissioner General from demanding and recovering taxes established after issuance of this Certificate.

HATI YA MAUZO YA FAMASI

Mkataba huu umeingiwa leo tarehe [illegible] mwezi [illegible] mwaka [illegible] kati ya [illegible] S.L.P [illegible] Dodoma, Wilaya ya [illegible] kwa upande mmoja (anaitwa katika mkataba huu atatwa muuzaji), na [illegible] wa S.L.P [illegible] Dodoma (anayeitwa kwa mkataba huu atatwa mnunuzi)

Mkataba huu unashuhudia na kuthibitisha kama ifuatavyo:

1. Kwamba muuzaji ni mmiliki halali wa Famasi inayouzwa inayo tambulika kwa jina la Avocado Pharmacy ambayo ipo katika mtaa wa [illegible] kata ya [illegible] Wilaya ya [illegible] Mkoa wa [illegible]
2. Kwamba muuzaji akiwa na akili timamu na kwa hiari yake anamuuzia mnunuzi Famasi hiyo kwa kiasi cha shilingi Milioni Kumi Taslimu.
3. Kwamba muuzaji anauza Famasi hiyo ikiwa haina migogoro yoyote na haiko chini ya madai yoyote na kwamba umiliki wa muuzaji wa Famasi hiyo haugombaniwi wala kubishaniwa na mtu yeyote.
4. Kwamba mnunuzi leo hii tarehe ya mkataba huu amemlipa muuzaji jumla ya shilingi 10,000,000/= taslimu ikiwa ni bei kamili ya mauzo ya Famasi hii (Avocado Pharmacy) na muuzaji kwa mkataba huu anakili kupokea fedha zote na hana madai yoyote dhidi ya mnunuzi.
5. Kwamba kwa mkataba huu muuzaji anamkabidhi mnunuzi Famasi hiyo (Avocado Pharmacy) iwe katika milki yake moja kwa moja na hatamgilia umiliki wa mnunuzi.

Kwa ushuhuda na uthibitisho mkataba huu umewekwa sahihi na muuzaji na mnunuzi mbele ya mashahidi kama inavyoonyeshwa hapa chini.

Muuzaji:

Jina: TUMBA REUBEN SOMOZA

Sahihi: [signature]

Tarehe: 20-09-2024

Shahidi wa muuzaji:

Jina: [illegible]

Sahihi: [signature]

Tarehe: 20/09/2024

Mnunuzi:

Jina: RAPHAEL SAMWEL MOSHA

Sahihi: [signature]

Tarehe: 20-09-2024

Shahidi wa mnunuzi

Jina: [illegible] Mosha

Sahihi: [signature]

Tarehe: 21/9/24

Kamishna wa viapo

Jina: [illegible]

Tarehe: 21/9/2024

Sahihi na muhuri: [signature]

Rahema Ramadhan Kamuzi
Advocate, Notary Public & Commissioner for Oaths

HATI YA MAUZO YA FAMASI

Mkataba huu umefanyika leo tarehe 20 mwezi 07 mwaka 2024 kati ya TIMBA SAMWEL SOMOLA S.L.P ..... Dodoma, Wilaya ya Dodoma kwa upande mmoja (ambaye katika mkataba huu atatwa muuzaji), na RAPHAEL SAMWEL MOMBA wa S.L.P 47 Dodoma (ambaye kwa mkataba huu atatwa mnunuzi).

Mkataba huu unashuhudia na kuthibitisha kama ifuatavyo:

1. Kwamba muuzaji ni mmiliki halali wa Famasi inayouzwa inayo tambulika kwa jina la Avocado Pharmacy ambayo ipo katika mtaa wa Makulu kata ya Nkuhungu Wilaya ya Dodoma Mkoa wa Dodoma
2. Kwamba muuzaji akiwa na akili timamu na kwa hiari yake anamuuzia mnunuzi Famasi hiyo kwa kiasi cha shilingi Milioni Kumi Taslimu
3. Kwamba muuzaji anauza Famasi hiyo ikiwa haina migogoro yoyote na haiko chini ya madai yoyote na kwamba umiliki wa muuzaji wa Famasi hiyo haugombaniwi wala kubishaniwa na mtu yeyote.
4. Kwamba mnunuzi leo hii tarehe ya mkataba huu amemlipa muuzaji jumla ya shilingi 10,000,000/= taslimu ikiwa ni bei kamili ya mauzo ya Famasi hii (Avocado Pharmacy) na muuzaji kwa mkataba huu anakili kupokea fedha zote na hana madai yoyote dhidi ya mnunuzi.
5. Kwamba kwa mkataba huu muuzaji anamkabidhi mnunuzi Famasi hiyo (Avocado Pharmacy) iwe katika milki yake moja kwa moja na hatairigilia umiliki wa mnunuzi.

Kwa ushuhuda na uthibitisho mkataba huu umewekwa sahihi na muuzaji na mnunuzi mbele ya mashahidi kama inavyoonyeshwa hapa chini.

Muuzaji:

Jina: TIMBA SAMWEL SOMOLA

Sahihi.....

Tarehe 20.07.2024

Shahidi wa muuzaji:

Jina: DEVOTHA KIDAWILA

Sahihi.....

Tarehe 20/07/2024

Mnunuzi.

Jina RAPHAEL SAMWEL MOMBA

Sahihi.....

Tarehe 20.07.2024

Shahidi wa mnunuzi

Jina ISSA MAULO

Sahihi.....

Tarehe 21/9/24

Kamishna wa viapo

Jina: RAMADHANI KEMIMP

Tarehe: 21/10/2024

Sahihi na muhuri.....

Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No	: **925009302748286**
Received from	: AVOCADO PHARMACY
Amount	: 200,000.00
Amount in Words	: Two Hundred Thousand TZS And Zero Cent(s) Only
Outstanding Balance	: 0.00

In respect of	**Item Description(s)**	**Item Amount**
: *142202540104 - Application for change of name/ ownership - CHANGE OF BUSINESS NAME & OWNERSHIP*	**200,000.00**	
	Total Billed Amount :	**200,000.00 (TZS)**

Bill Reference	: 16215006250740938664
Payment Control Number	: ***991620292221***
Payment Date	: **2025-01-09 17:05:27**
Issued by	: Zena Mango
Date Issued	: 2025-04-03 14:44:05
Signature	: