

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: WAKA PHARMACY FIN. 0102804

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

PHYSICAL ADDRESS:

Plot No. --- Street: STENDI YA KWANZA Ward: KISESA

District/Municipal: MAGU Region: MWANZA

POSTAL ADDRESS: P.O. BOX 236 - MAGU Contact No. 0748193384

E-mail: Williamsangel361@gmail.com

OWNERSHIP:

Directors (Names): 1. ABUWALIB ISA Qualification: ---

2. --- Qualification: ---

3. --- Qualification: ---

SUPERINTENDANT INFORMATION:

Full Name: NZUGUNA DEGRATIUS CHACHA PIN: 0101489

Residential Address: ILEMELE - MWANZA Tel: 0752937524 Email: nzugunachacha@gmail.com

Contract commencement date: 01/10/2022 Cessation date: 30/09/2024

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: WAKA PHARMACY

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

PHYSICAL ADDRESS:

Plot No. --- Street: STENDI YA KWANZA Ward: KISESA

District/Municipal: MAGU Region: MWANZA

POSTAL ADDRESS: P.O. BOX 30 - MAGU CONTACT No. 0748193384

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. ANGELINA W. KASANZU Qualification:
2. Qualification:
3. Qualification:

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: PIN:

Residential Address: Tel: Email:

Contract commencement date: Cessation date:

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. PHARMACY SOLD TO ANOTHER PERSON.
2.

SECTION D: APPLICANT INFORMATIONName of Applicant: ANGELINA WILLIAM KASANZU

(Contact/email if different from the above)

Address: P.O. Box 368 Tel: 0748193384 E-mail: williamsangel361@gmail.comSignature of Applicant: [Signature] Date: 21/12/2023**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: [Signature] Date: 21/12/2023**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)



Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No : 924005224800423

Received from : WAKA PHARMACY

Amount : 100,000.00

Amount in Words : One 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 OWNERSHIP		100,000.00

Total Billed Amount : 100,000.00 (TZS)

Bill Reference : 16210005245102006048

Payment Control Number : 991620233682

Payment Date : 2024-01-05 11:02:46

Issued by : Beatuss Mpogoza

Date Issued : 2024-01-05 11:09:28

Signature

**TANZANIA REVENUE AUTHORITY**

ISO 9001: 2015 CERTIFIED

TAX CLEARANCE CERTIFICATE*(Issued Under Regulation 103 of Tax Administration (General) Regulations, 2016)*

Licencing Authority; TIN : 101-321-843

MAGU DISTRICT COUNCIL

ITUMBILI

200

MAGU

Tax Certificate Number:

261-0191-0292

Issuing Office: Mwanza

Telephone: 028 2500906

Date of issue: 30 January 2024

Expiry Date: 31 December 2024

Taxpayer Name	ABUTWALIB ISSA NYABUZOKI		
Trading Name			
Taxpayer Identification Number	163-880-202	Vat Registration Number	
Company Registration Number			

Business Premises located at :

REGION : MWANZA,

DISTRICT : MAGU,

STREET : Wita

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	Barber shops or hair cutting saloon
2	Activity for Non Business Purposes

Alfred T. Mregi

COMMISSIONER FOR DOMESTIC REVENUE

30 January 2024

**Disclaimer :**

1. This certificate is issued free of charge

HALMASHAURI YA WILAYA YA MAGU

MKATABA WA MAUZIANO YA DUKA

Mkataba huu umefanyika leo tarehe ...12..... Mwezi ...09..... mwaka 2023.

Baina ya

Ndugu ABUWDLIB ISSA NYABUZOKI wa S.I.p
ambaye katika mkataba huu atajulikana kama **Muuzaji** wa Duka la vifaa vya
DAWA (WAKA PHARMACY)
lililopo KISESA STENDI YA KWANZA Kata ya KISESA Wilaya ya MAGU

Na

Ndugu ANGELINA WILLIAM wa S.I.p IGOMA mwenye
namba ya Simu 0748193384.... ambaye katika mkataba huu anajulikana
kama **MNUNUZI** kwa upande mwingine.

a) **NA KWA KUWA** muuzaji kwa hiari yake ameridhia kumuuzia mnunuzi
Duka lililopo KISESA..... Halmashauri ya Wilaya ya MAGU... Kata ya
KISESA...

b) **NA KWAKUWA** mnunuzi ameridhia kununua Duka kamal ilivyo.

HIVYO PANDE ZOTE MBILI ZINAKUBALIANA KAMA IFUATAVYO.

1. Kwamba, Mauziano ya Duka ni Tanzania shilingi 6,500,000
(Tsh. MILIONI SITTA NA LAKI TANO TU)
2. Kwamba pesa yote Tanzania shilingi 5,500,000 MILIONI TANO NA LAKI TANO
(Tsh. 5,500,000 /2) imelipwa siku ya kusaini mkataba huu kwa
muuzaji. NA 1,000,000/2 italipwa baada ya mwerimmeja
na nusu
3. Kwamba, muuzaji amemuhakikishia mnunuzi kwamba Duka tajwa ni mali
yake mwenyewe na siyo mali ya familia.

4. Kwamba, muuzaji amemuhakikishia mununuzi husika husika halina mkopo wowote kutoka kwa Taasisi zozote za kifedha wala kutoka kwa mtu yoyote binafisi.
5. Kwamba, endapo ikitokea kwamba muuzaji siyo mmiliki halali wa Duka, muuzaji atawajibika kumrudishia pesa yote mnunuzi pamoja na asilimia hamsini (50%) ya manunuzi ya Duka tajwa.
6. Kwamba, mkataba huu utaongozwa na sheria za Jamuhuri ya Muungano wa Tanzania.

IMESAINIWA SAHIHI HAPA

A. MUUZAJI

Jina la Muuzaji ABU WALIB LSSA NYABURUKA Sahihi [Signature] Simu 0688172454

SHAHIDI WA MUUZAJI

1. Jina FROLIDA JOHN Sahihi P. John Simu 0752363537
 2. Jina Sahihi Simu
 3. Jina Sahihi Simu
- Leo tarehe 12 mwezi 09 mwaka 2023

B. MNUNUZI

Jina la Mununuzi ANGELINA WILLIAM Sahihi [Signature] Simu 0748193884

SHAHIDI WA MNUNUZI

1. Jina KHAMISI JIMMY Sahihi [Signature] Simu 0755666363
 2. Jina MASOUD Mwanambwa Sahihi [Signature] Simu 0757-722909
 3. Jina Sahihi Simu
- Leo tarehe 12 mwezi 09 mwaka 2023



MKATABA WA PANGOLA CHUMBA CHA BIASHARA
KILICHOPO JB- CLUB
BARABARA KUU MWANZA- MUSOMA

MASHARTI YA PANGO.

1. Kodi ya chumba kimoja (1) cha biashara ni Tshs. Laki mbili (200,000/=)
2. Mpangaji atalipia kodi ya pango kuanzia miezi sita (6) na kuendelea
3. Kodi ya pango lazima ilipwe mwanzo wa mwezi kabla mpangaji ajaanza biashara pindi mkataba wa awali unapo kwisha. Mpangaji haruhusiwi kuendesha biashara kabla hajalipa mkataba mwingine.
4. Kodi ya pango hairudishwi mpangaji akishaanza kutumia chumba na baadae akaairisha au kusitisha biashara yake.
5. Mpangaji ni lazima alipe gharama za ulinzi Tshs. Elfu tisa miano tu (9,500/=) kwa kilamwezi.
6. Mpangaji anatakiwa atoe taarifa ya mwezi mmoja anapo taka kurudisha chumba.
7. Chumba kikabidhiwe kwa mwenye nyumba au msimamizi kikiwa katika hali nzuri kama kilivyokuwa mwanzoni.
8. Bili ya umeme ya kila mwezi itachangiwa na wapangaji wote kulingana na matumizi.
9. Usafi wa mazingira ya nje ya chumba nilazima ufanywe na mpangaji husika.
10. Matumizi ya choo.
- ❖ Mpangaji atachangia gharama za usafi wa choo Tsh.5,000/= kwa mwezi.
- ❖ Malipo yatafanyika kwa muhusika atakaye kabidhiwa kusimamia usafi wa choo.
11. Mpangaji haruhusiwi kupangisha chumba alichopanga kwa mtu mwingine.
12. Mpangaji ni lazima asome masharti haya kwa makini ndipo ajaze mkataba huu nilazima ayatimize masharti haya pasipo usumbufu.
13. Mpangaji asipo zingatia masharti haya ndani ya mkataba wake, utasitishwa na kuondolewa kwenye chumba.

MAELEZO YA MPAGISHAJI (MWENYE NYUMBA/MSIMAMIZI)

Mimi JOHN K. BUNYANYA wa KISASA S.L.P. 11078 Simu. 0754-440915
0766-292796
Nimepokea Tsh. 4,000,000/- kutoka kwa ndugu ANGELINA WILLIAM
Kwaajili ya malipo ya chumba kuanzia leo tarehe 01/01/2024 mwisho wa mkataba
tarehe 31/12/2025 Naweza kumtoa mpangaji wakati wowote endapo atakiuka masharti hayo hapo juu.
Sahihi ya mwenye nyumba/ msimamizi [Signature]

MAKUBALIANO YA MPANGAJI

Mimi ANGELINA WILLIAM wa IGOMA S.L.P. Simu. 0748193384
Nimekubaliana na masharti yaliopo hapo juu na ninalipa Tsh. 4,000,000/- kwa
maneno Milioni nne tu zamwezi/miezi/mwaka Malaga miwili za
pango kuanzia tarehe 1/1/2024 Mwisho wa mkataba Tarehe 31/12/2025
Sahihi ya mpangaji [Signature]



TANZANIA



Extract date and time: 29/12/2023 10:29:29

Registration date and time: 29/12/2023 10:28:18

The Business Names (Registration) Act (Cap 213)

Extract from Register

1. Name of Business: **WAKA PHARMACY**
2. Registration number: **561622**
3. Principle Place of Business: Region Mwanza, District Magu, Ward Kisesa, Postal code 33409, Wita Street near Kisesa Bus stop
4. Contacts: Email williamsangel361@gmail.com, Phone 0748193384, P.O.Box 3168
5. Business activity: 8620 - Medical and dental practice activities
8690 - Other human health activities
6. Propriator/Partners: ANGELINA WILLIAM KASANZU
7. Authorized to Operate Bank Account etc: ANGELINA WILLIAM KASANZU

*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.



DRIVING LICENCE

THE UNITED REPUBLIC OF TANZANIA

1 Family name

2 Given names

3 Date of birth

4a Date of issue

4b Date of expiry

5 Issuing authority

6 Permanent place of residence

7 Categories of Vehicles

8 Signature

KASANZU

ANGELINA WILLIAM

01/10/1994

09/06/2022

08/06/2027

TANZANIA REVENUE AUTHORITY

Mwanza

B D

5 Licence number

4006920425

DRIVING LICENCE

0600000093





4006920425

9 Categories of vehicles

10 Date of issue

11 Date of expiry

A			
A1			
A2			
A3			
B		27/05/2022	08/06/2027
C			
C1			
C2			
C3			
D		27/05/2022	08/06/2027
E			
F			
G			