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PCF.14

PHARMACY COUNCIL

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

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

PHARMACY COUNCIL
22 JUL 2025
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: YORDANI PHARMACY FIN 0102751

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

PHYSICAL ADDRESS:

Plot No. 25 Street: MAKULU Ward. MAPINDUZI NORTH

District/Municipal. DODOMA Region: DODOMA

POSTAL ADDRESS: 2269 Contact No. 0768361566

E-mail: Mistyjanovera@gmail.com

OWNERSHIP:

Directors (Names): 1. Beatrice Massawe Qualification: Nurse

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

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

SUPERINTENDANT INFORMATION:

Full Name: JOHN KIGUMUNYI PIN: 0103306

Residential Address: DODOMA Tel 0611277393 Email: johnleonard739@gmail.com

Contract commencement date: July 2023 Cessation date July - 2025

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: YORDANI PHARMACY

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

PHYSICAL ADDRESS:

Plot No. 25 Street MAKULU Ward MAPINDUZI NORTH

District/Municipal DODOMA Region DODOMA

POSTAL ADDRESS: 2 CONTACT. No. .....

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. Innuzar Misty ..... Qualification: Pharmacist

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

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

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: CEARE V. MAKANTILA ..... PIN: 0102610

Residential Address: DODOMA ..... Tel: 0753032488 Email: Makajivesna@gmail.com

Contract commencement date: July - 2025 ..... Cessation date .....

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. Lack of enough Capital to run the business.

2. Family problems.

SECTION D: APPLICANT INFORMATION

Name of Applicant: Innuzar Misty

(Contact/email if different from the above)

Address: Morogoro ..... Tel: 0754 476420 ..... E-mail: mistyinnuzar@gmail.com

Signature of Applicant ..... Date 22.07.2025

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 22.07.2025

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	: **925203350602117**
Received from	: YORDANI 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	: 16215203251841838677
Payment Control Number	: ***991620322107***
Payment Date	: **2025-07-22 15:58:49**
Issued by	: Zena Mango
Date Issued	: 2025-07-22 16:19:12
Signature	: .....

THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH

PHARMACY COUNCIL

DECLARATION FORM FOR PHARMACY OWNERS WHO ARE PHARMACEUTICAL PERSONNEL

(Made under Section No. 43 (1) (a) of the Pharmacy Act 2011)

Cadre: Pharmacist ☑ Pharm. Technician ☐ Pharm. Assistant ☐ Pharm. Dispenser ☐

Owner's Responsibilities: Superintendent ☐ Other Pharmaceutical Personnel ☑

I Innocent Mistry with Personal Identification Number (PIN) 0103596 of Year 2024, residing at Morogoro district, in Morogoro Region, Hereby declares that:

I am a Sole proprietor/shareholder of pharmaceutical business named Yordani Pharmacy, with Facility Identification Number (FIN) 010 2751 of year 2023, located at Dodoma District, Dodoma Region with a Business Tax Identification Number (TIN) 141-417-460 (**TIN Certificate to be attached**)***.

As the owner of the named pharmacy, I shall abide to all obligations as a proprietor and I will comply with the Laws, Regulations, Guidelines and Standards prescribed by the Council and other relevant authorities in running the business of a pharmacist.

In case I fail to adhere to these legislations, I shall be responsible and liable for being subjected to a professional misconduct.

Phone: 0754 476420 Email Address: mistryinnocent@gmail.com

Signature: [signature] Date: 21.07.2025

NOTE: This form shall be a substitute of the **Contract agreement** to pharmacists / Other Pharmaceutical Personnel who owns a pharmacy at same time they are superintendent/practice as other pharmaceutical personnel in the pharmacy.

In this case, the owner shall abide to obligations/ scope of practice as stated under The Pharmacy (Pharmacy Practice and the Conduct of Business of Pharmacy) Regulations, 2020.

*** **Mandatory**

MKATABA WA MAUZIANO YA BIASHARA

KATI YA MUUZAJI

Beatrice Massawe

NA MNUNUAJI

Innocent Mistry

MKATABA WA MAUZIANO YA BIASHARA

Huu ni mkataba uliowekwa tarehe 14.07.2025 kati ya:

1. Beatrice Massawe, raia wa Tanzania, mwenye Kitambulisho cha Taifa Na. 19790224441107000215, anayeishi Dodoma (hapa atajulikana kama "Muuzaji"),

NA

2. Innocent Mistry, raia wa Tanzania, mwenye Kitambulisho cha Taifa Na. 19941214411020000623 anayeishi Morogoro (hapa atajulikana kama "Mnunuzi").

KIFUNGU CHA 1: MAELEZO YA BIASHARA

Muuzaji anakubali kuuza, na Mnunuzi anakubali kununua, biashara ijulikanayo kama Yordani Pharmacy, iliyoko eneo la Dodoma Mjini, ambayo inajihusisha na Kuuza dawa.

Biashara inajumuisha:

Mali yote ya biashara (samani, vifaa, mashine, nk),

Hakimiliki (YORDAN PHARMACY iliyo sajiliwa brela),

Mizigo yani dawa na jengo liliwo sajiliwa kama pharmacy na baraza la famasia,

KIFUNGU CHA 2: BEI YA BIASHARA

Bei kamili ya biashara hii ni TZS 2,000,000 (Shilingi milioni mbili tu), ambayo italipwa na Mnunuzi.

KIFUNGU CHA 3: HATUA YA UKABIDHI

Muuzaji atakabidhi rasmi biashara hii kwa Mnunuzi tarehe 20/07/2025, baada ya malipo kupokelewa.

KIFUNGU CHA 4: DHAMANA NA UTHIBITISHO

Muuzaji anathibitisha kwamba:

Yeye ndiye mmiliki halali wa biashara hiyo. Biashara haina madeni yaliyofichwa, kesi au masharti yoyote yanayozuia uuzaji. Hakuna makubaliano mengine ya kuuza biashara hii kwa mtu mwingine.

KIFUNGU CHA 5: MENGINEYO

Mkataba huu umeandaliwa kwa lugha ya Kiswahili na unaweza kutafsiriwa kwa Kiingereza kwa makubaliano ya pande zote.

Mkataba huu unaweza kufanyiwa marekebisho kwa maandishi na kwa ridhaa ya pande zote mbili.

Migogoro yoyote itakayojitokeza itatatuliwa kwa njia ya mazungumzo, na ikishindikana, itapelekwa kwa usuluhishi au mahakama.

Hivyo basi pande zote mbili zinaweka saini zao mbele ya mwanasheria kama ifuatavyo;

UMESAINIWA na **KUWASILISHWA** na **LEY ALLY KAJIMBWA** ambaye namfahamu binafsi/ametambulishwa na .....leo hii tarehe ..... mwezi 2025

.....
MWENYE NYUMBA

UMESAINIWA MBELE YA:
MBELE YANGU:
SAINI: .....
JINA: ...AYUBU DAVID SUDAY...
WADHIFA: ...WAKILI.....
ANUANI: ....L.3.....DODOMA

UMESAINIWA na **KUWASILISHWA** na **JAMES PROTAS MWOMBEKI** ambaye Namfahamu binafsi/ ametambulishwa na ..... leo hii tarehe..... mwezi.....2025

.....
MPANGAJI

UMESAINIWA MBELE YA:
MBELE YANGU:
SAINI: .....
JINA: ...AYUBU DAVID SUDAY...
WADHIFA: ....WAKILI.....
ANUANI: .....L.3.....DODOMA

TANZANIA REVENUE AUTHORITY

ISO 9001: 2015 CERTIFIED

TAX CLEARANCE CERTIFICATE

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

Licencing Authority, TIN : 101-221-490
MKURUGENZI WA JIJI DODOMA
SALAMA
1249
DODOMA

Tax Certificate Number:
161-0193-1241

Issuing Office: Dodoma
Telephone: 026 23222912
Date of issue: 14 February 2024
Expiry Date: 31 December 2024

Taxpayer Name	BEATRICE BASIL MASSAWE		
Trading Name			
Taxpayer Identification Number	111-468-664	Vat Registration Number	
Company Registration Number			

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

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 clothing, footwear and leather articles in specialized stores

2 Pharmacy at Makulu

TANZANIA REVENUE AUTHORITY
REGIONAL MANAGER
P.O. Box 679, DODOMA

Alfred T. Mregi
COMMISSIONER FOR DOMESTIC REVENUE
14 February 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

MKATABA WA UPANGISHAJI WA FRAME YA BIASHARA KIWANJA NAMBA 6114 KITALU ..B.... DODOMA

KATI YA

HASHIMU SAIDI SHABANI

NA

INNOUZAR MISTRY

MKATABA WA UPANGISHAJI WA FRAME YA BIASHARA
KIWANJA NAMBA 614. KITALU...B... DODOMA

Mkataba huu wa upangaji wa Frame ya Biashara unafanyika leo tarehe22... Mwezi....07.....2025.

KATI YA

HASHIMU SAIDI SHABANI wa sanduku la Posta .....Dodoma ambaye atajulikana kama mwenye nyumba kwa upande mmoja

NA

INNOUZAR MISRTY wa **sanduku** la Posta .... Dodoma **ambaye** atajulikana kama mpangaji.

Kwa vile mwenye nyumba ni mmiliki halali wa nyumba tajwa hapo juu na kwa hiyari yake mwenyewe bila kushurutishwa na mtu ameamua kupangisha Frame yake na Mpangaji anania ya kupanga katika nyumba hiyo;

Hivyo basi pande zote mbili zinaweka masharti ya makubaliano kama ifuatavyo;

1. **Kwamba**, muda wa upangaji ni wa kipindi cha mwaka mmoja mkataba huu utaanza tarehe 22.. Mwezi..07. 2025 hadi tarehe ..... Mwezi.01.. mwaka.2026..... 2026,mkataba ambao unaweza kurudiwa kwa makubaliano mapya kati ya Mwenye nyumba na mpangaji.
2. Kwamba, bei ya kodi kwa mwezi ni shilingi...80000/=..... (Tshs...../=) tu ambayo ni sawa na shilingi .....960000/=..... (Tshs ...../=) tu kwa kipindi cha mwaka mmoja
3. Kwamba,kodi italipwa kwa awamu .....1.Mmoja mara baada ya kusaini mkataba huu

4. Kwamba, mpangaji anawajibika kulipia bili ya umeme na maji (maji safi na maji taka) na malipo mengine ya kijamii kwa jinsi atakavyotumia.
5. Kwamba,mpangaji hataruhusiwa kufanya marekebisho au matengenezo yoyote ndani ya nyumba bila makubaliano yoyote na mwenye nyumba.
6. Kwamba,endapo mpangaji atapenda kuendelea na mkataba mpya baada ya kumalizika kwa mkataba huu atalazimika kumuarifu Mpangishaji mwezi mmoja kabla ya mkataba kuisha,juu ya kusudio hilo.
7. Kwamba,endapo mwenye nyumba au mpangaji ataamua kusitisha mkataba basi atatoa notisi ya mwezi mmoja.
8. Kwamba,Mwenye nyumba naye anakubali kufanya yafuatayo wakati huo wa mkataba:
    a) Kuweka nyumba katika hali nzuri ya matengenezo yanayofaa kwa biashara.
    b) Pale ambapo mpangaji amelipa kodi ipasavyo kumuwezesha akae na kufurahia ukaaji wake katika kipindi chote cha mkataba.
    c) Kulipia kodi ya kiwanja na kodi nyingine zote zinazotambulika kisheria .
    d) Kuhakikisha kwamba taarifa zote anatakiwa kumpa mpangaji zinamfikia kwa maandishi.

1

Hivyo basi pande zote mbili zinaweka saini zao mbele ya mwanasheria kama ifuatavyo;

UMESAINIWA na **KUWASILISHWA** na **HASHIMU SAIDI SHABANI**
ambaye
namfahamu binafsi/ametambulishwa
na ....Wakili.....leo hii tarehe
...22..... mwezi ...7..... 2025

.....

MWENYE NYUMBA

UMESAINIWA MBELE YA:
MBELE YANGU:
SAINI: ..AYUBU DAVID SUDAY
JINA: AYUBU...DAVID...SUDAY..
WADHIFA: ..MAKILI.....
ANUANI: ....U.3.....DODOMA

Ayubu David Suday
Box 43 Dodoma
Advocate, Notary Public & Commissioner for Oaths

UMESAINIWA na **KUWASILISHWA** na
INNOZAR MISTRY ambaye
Namfahamu binafsi/ ametambulishwa na wakili.
leo hii tarehe...22..... mwezi....07.....2025

.....

MPANGAJI

UMESAINIWA MBELE YA:
MBELE YANGU:
SAINI: AYUBU...DAVID...SUDAY
JINA: ..AYUBU...DAVID...SUDAY.
WADHIFA: ....MAKILI.....
ANUANI: ....U.3.....DODOMA....

Ayubu David Suday
Box 43 Dodoma
Advocate, Notary Public & Commissioner for Oaths

Form 5

TANZANIA

BRELA
BUSINESS REGISTRATIONS AND LICENSING AGENCY

No. 545120

Certificate of Registration

The Business Names (Registration) Act (Cap 213)

I HEREBY CERTIFY THAT **YORDANI PHAMACY** this **14th** day of **JUNE** year **2023** 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 **545120** in the Index of Registration.

GIVEN under my hand at Dar es Salaam this **14th** day of **JUNE TWO THOUSAND AND TWENTY THREE**.

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.