PCF. 17

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 KARIM PHARMACY. Facility Identification Number (FIN).....

Physical address:

Street BWAWANI Ward KIJITONYAMA District/Municipal KINONDONI Region DAR-ES-SALAAM

A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL

Full Name IMAN CHARLES LIGUHA PIN 019175D Phone 0713248802

Address DAR-ES-SALAAM Email Imanliguha05@gmail.com

A.3. REASON(s) FOR CHANGE

END OF CONTRACT.

Time frame of notification: (As per Contract) 30 days Signature [signature] Date 12/06/2025

A.4. OWNER'S DETAILS

Full Name NURDIN AHMED Phone Number 0713 521971

Remarks.....

Signature..... Date 29/05/2025

B. TO BE COMPLETED BY THE OWNER ONLY

B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL

Full Name ..... PIN..... Phone Number..... Email.....

Physical address:

Street..... Ward..... District/Municipal..... Region.....

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

Recommendations.....

Full Name..... Designation..... Signature..... Date .....

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.

IMAN CHARLES LIGOHA
S.L.P 9173
DAR ES SALAAM

30-06-2025

MSAJILI, BARAZA LA FAMASI.
S. L.P 31818
DAR ES-SALAAM.

MAOMBI YA KUZITOA KWENYE FAMASI.

Mimi ni Iman Charles Ligoha ni mfamasia mwenye usajili wa namba 0101750 najitoa kwenye famasi ya KARIM iliyopo Kijitonyama / Makumbusho kwa kufukuzwa na mkataba na mwenye famasi hizo pamoja na kutolipwa Malipo ya mwezi wa tano mpaka wa sita. Naomba tafadhali zangu nilizoziwa ni za ukweli na kujitoa rasmi.

Nawasilisha

IMAN CHARLES LIGOHA.