



JONATHAN MANYAMA KIFUNDA,
P.O. BOX 19,
SHINYANGA.
15 – JUNE - 2023.

REGISTRAR,
PHARMACY COUNCIL OF TANZANIA,
P.O. BOX 1277,
DODOMA.

Dear Sir/Madam

RE: NOTICE OF PHARMACY BUSINESS CLOSURE.

Refer to the heading above.

I am JONATHAN MANYAMA KIFUNDA, owner of Pharmacy Business entitled as **NGUZO NANE PHARMACY** located in Ndala, Shinyanga Municipal.

After almost four (4) of business operation, I am reaching out to inform your office on the Closure of the above-mentioned business. The Reason for closure includes Failure to afford operational cost initiated by Business operation hardship at the location.

However, I would like to request the Council to cease the registration of this pharmacy business effectively from today 15th June 16, 2023, because the business is no longer operating. Looking forward to hearing from you.

Yours faithful,

A handwritten signature in black ink, appearing to be "JMK", with a long horizontal line extending to the right.

Jonathan Manyama Kifunda.

PHARMACY COUNCIL



PREMISES REGISTRATION CERTIFICATE

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

FIN: 0101144

This is to certify that the premises owned by M/S Nguzo Nane Pharmacy of P.O. Box 1195, Shinyanga located at Nguzo nane, Ndala, Shinyanga Mjini Municipality/District in Shinyanga Region has been registered for Retail Only to sell pharmaceutical and related products with Facility Identification Number (FIN) 0101144

Issued in: February 2020

28-03-2020

DATE:

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



PHARMACY COUNCIL



PERMIT TO OPERATE THE BUSINESS OF A PHARMACIST

Made under Section 37 of the Pharmacy Act Cap. 311

Permit No. 01144-2023

This Permit is hereby granted to M/S Nguzo Nane Pharmacy of P.O. Box 1195, Shinyanga to operate a Retail Only Business at the premises situated/lying between Nguzo nane, Ndala, Shinyanga Mjini Municipality/District in Shinyanga Region with Facility Identification Number (FIN) 0101144 under a superintendent Pharmacist Franco Paul with Personal Identification Number (PIN) 0101753

Issued in: February 2020

Expires on: 30 June 2023

19-11-2022

DATE:

SIGNATURE OF REGISTRAR

CONDITIONS

1. This Permit shall have and continue to have effect from and including the day when it is issued and does not authorize the holder to operate business in unregistered premises or during the period of suspension, revocation or cancellation
2. The nature of conducting business shall conform to the category of pharmacist business registered
3. This permit does not authorize the holder to sell or supply medicines illegally to unlicensed premises.
4. When vacating the registered premises, the superintendent pharmacist shall surrender to the Council the original Premises Registration Certificate and Business Permit
5. The permit is non transferable and Council reserves the right to suspend, revoke or cancel any certificate or permit issued under this Act if satisfied terms and conditions have been violated

