#### 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 Edward Pharmacy Facility Identification Number (FIN) 02000 29  Physical address:  Street Longo Ward Longo District/Municipal M&YA Region MBLYA
	A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL  Full Name Lavasia is kobilo PIN 0456377 Phone 0672645493  Address Lavasia Email
	A.3. REASON(s) FOR CHANGE OF PETIDENCY
	Time frame of notification: (As per Contract)
	A.4. OWNER'S DETAILS Full Name FOION JEESHIA NYASIKA Phone Number 0712768654 Remarks Signature F Marko Date 1/7 / 2024
В.	TO BE COMPLETED BY THE OWNER ONLY
	B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL  Full Name HANCS SONGWARI PIN 049376 Phone Number 0676557345 Email diabland Constituted Physical address:  Street HANCS Ward HANCS District/Municipal MGSYA Region MBSYX  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
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.
	NR: Other pharmaceutical personnel mean any pharmaceutical personnel apart from superintendent.