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: MBASA PHARMACY Facility Identification Number (FIN): 0102170

Physical address:

Street: CCM-street Ward: KATORO District/Municipal: GEITA DC Region: GEITA

A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL

Full Name: THUMUM D. MBUTA PIN: 010295 Phone: 0756-499114

Address: P.O.Box - MWANZA Email: dotathumum@gmail.com

A.3. REASON(S) FOR CHANGE

Superintendent's Residence Changes hence far from the Community Pharmacy business

Time frame of notification: (As per Contract) Ninty days Signature: [signature] Date: 19/03/2025

A.4. OWNER'S DETAILS

Full Name: JAPHET PETER GEITA Phone Number: 0674-931 190

Remarks: Received

Signature: [signature] Date: 19/03/2025

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