PHARMACY COUNCIL

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

Registrar,
Pharmacy Council,
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 URAFIKI PHARMACY FIN. 0903142

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

PHYSICAL ADDRESS:

Plot No. ..... Street: KIBAONI Ward. BUSWELU

District/Municipal. ILEMELA Region: MWANZA

POSTAL ADDRESS: ..... Contact. No. 0753016 73

E-mail: .....

OWNERSHIP:

Directors (Names): 1. MARIA P. KATULA Qualification: BUSINES WOMAN

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

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

SUPERINTENDANT INFORMATION:

Full Name: SAMIRU K. KAZINGO PIN: 0102935

Residential Address: BUSWELU, MWANZA Tel: 0683640928 Email: kazingosamiru@gmail.com

Contract commencement date: 30/06/2024 Cessation date 30/06/2025.

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: JACKSON JOSEPH MAGIGE

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

PHYSICAL ADDRESS:

Plot No. ..... Street. KIBAONI Ward. BUSWELU

District/Municipal. ILEMELA Region MWANZA

POSTAL ADDRESS: BUSWELU CONTACT. No. 0757373698

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. JACKSON JOSEPH Qualification: CLINICAL OFFICER
2. ..... Qualification: .....
3. ..... Qualification: .....

SUPERINTENDANT INFORMATION: (IF DIFFERENT FROM PREVIOUS ONE)

Full Name: ..... PIN: .....

Residential Address: ..... Tel: ..... Email: .....

Contract commencement date: ..... Cessation date .....

SECTION C: REASON(S) FOR PARTICULAR ALTERATION

1. KWA SABABU YA MAUZIANO
2. .....

SECTION D: APPLICANT INFORMATION

Name of Applicant: JACKSON JOSEPH MAGIGE

(Contact/email if different from the above)

Address: P.O.Box 40, MWANZA Tel 0757373698 E-mail: jjmagige45@gmail.com

Signature of Applicant..... Date 05/03/2025

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 05/03/2025

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)

MKATABA WA MAUZIANO YA DUKA LA DAWA(PHAMARCY)

Mkataba huu umefanyika leo tarehe 4/3/2025 saa 4.24 pm

BAINA YA

Ndugu Maria P Kafula wa S.L.P ..... Ambaye katika mkataba huu ni muuzaji wa duka la dawa(pharmacy)

Sahihi ..... dole gumba ..... namba ya simu 0753031673 nida namba 19850802-33116-00002-11

(1)UTHIBITISHO WA MUUZAJI

Mimi Maria Paul Kafula ..... Nimekubali kumuuzia duka hili la dawa Ndugu JACKSON JOSEPH kwa Tsh 7,500,000/= pesa hizi zitawekwa kwenye akaunti namba 015233881390O-CRDB kwa hiari yangu nadhibitisha kuwa tangu sasa hili duka halitakuwa langu na litakuwa miliki ya bwana JACKSON-JOSEPH sahihi ..... namba ya simu 0757393695

(2)MASHAHIDI UPANDE WA MUUZAJI

I)SHAHIDI WA KWANZA

Mimi Jenifer Benphaca wa s.l.p Kidiri nathibitisha kuwa shahidi upande wa muuzaji wa duka kuwa

Ndugu Maria P. Kafula amemuuzia duka la dawa ndugu JACKSON-JOSEPH

Sahihi .....

ii)SHAHIDI WA PILI

Mimi SAEL-ARANJO wa s.l.p 126 nathibitisha kuwa shahidi upande wa muuzaji wa duka kuwa

Ndugu Maria-P-Kafula amemuuzia duka la dawa ndugu Jackson-Joseph

Sahihi .....

Makubaliano haya yamefanyika mbele ya mwanasheria

Jina DANIEL-B-MALUGU

Cheo ADVOCATE

Sahihi .....

Muhuri 4/3/2025

MKATABA WA KUPANGISHA ENEO LA BIASHARA

MIMI Corsolatx PETER NIMEMPANGISHA

NDUGU MARIA PAUL KATULA ENEO LANGU LILILOKO BUSWELU KWA TSH. 490,000/= KWA MANENO LAKI NNE NA THEMANINI ELFU KWA MWAKA.

HIVYO MKATABA UMEFANYIKA LEO TAREHE 10/03/2024 MPAKA 10/03/2025 NDIO UTAKUWA MWISHO WA MKATABA HUU NA KUFUNGA MKATABA MPYA KAMA ATAENDELEA.

MKATABA HUU UMEFANYIKA MBELE YA MASHAHIDI WAFUATAO:

- **MPANGISHAJI**

SAHIHI ..... ***TAREHE*** 10/03/2024

- **MPANGAJI**

SAHIHI M.P.L ***TAREHE*** 10/03/2024

- SHAHIDI WA MPANGISHAJI

JINA Ismail Tafiki

SAHIHI ..... ***TAREHE*** 10/03/2024

- SHAHIDI WA MPANGAJI

JINA Nanziga Melabiory

SAHIHI ..... ***TAREHE*** 10/03/2024

1194559

TANZANIA REVENUE AUTHORITY

CERTIFICATE OF REGISTRATION

FOR

TAXPAYER IDENTIFICATION NUMBER (TIN)

(ISSUED UNDER SECTION 21 OF THE TAX ADMINISTRATION ACT 2015)

THIS IS TO CERTIFY THAT

MARIA PAUL KATULA

BRANCH: NYAMAGANA - KANINDO

HAS BEEN REGISTERED WITH THE TANZANIA REVENUE AUTHORITY AND ASSIGNED THE TAXPAYER IDENTIFICATION NUMBER

133-636-577

WITH EFFECT FROM: **10 MARCH 2020**

TRA LOCATION: **KINONDONI** TAX OFFICE: **KIMARA**

PHYSICAL LOCATION: **PLOT No. 9999 BLOCK No. 257**

STREET / AREA: **KANINDO**

ALFRED T. MREGI

COMMISSIONER FOR DOMESTIC REVENUE

NOTE: [illegible]

PHARMACY COUNCIL

PERMIT TO OPERATE THE BUSINESS OF A PHARMACIST

Made under Section 37 of the Pharmacy Act Cap. 311

Permit No. 03142-2024

This Permit is hereby granted to M/S *Urafiki Pharmacy* of *P. O. Box 33180, Ilemela* to operate a *Retail Only Business* at the premises situated/lying between *Kijiweni Street, Buswelu, Ilemela* Municipality/District in *Mwanza* Region with Facility Identification Number (FIN) *0103142* under a superintendent Pharmacist *Samiru K Kazingo* with Personal Identification Number (PIN) *0102955*

Issued in: *May 2024*

Expires on: *30 June 2025*

11-08-2024

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*

TANZANIA REVENUE AUTHORITY

CERTIFICATE OF REGISTRATION
FOR
TAXPAYER IDENTIFICATION NUMBER (TIN)

(ISSUED UNDER SECTION 23 OF THE TAX ADMINISTRATION ACT 2015)

THIS IS TO CERTIFY THAT

JACKSON JOSEPH MAGIGE

HAS BEEN REGISTERED WITH THE TANZANIA REVENUE AUTHORITY AND ASSIGNED THE TAXPAYER IDENTIFICATION NUMBER

177-293-792

WITH EFFECT FROM: **21 ST AUGUST 2024**

TRA LOCATION: **MWANZA** TAX OFFICE:**NYAMAGANA**

PHYSICAL LOCATION **PLOT 54 BLOCK 54**

STREET / AREA: **NYASAKA SENTA**

Not Valid For Use Only

ALFRED T. MREGI
COMMISSIONER FOR DOMESTIC REVENUE

NOTE: THE REQUIREMENTS UNDER WHICH THIS CERTIFICATE IS ISSUED ARE STATED OVERLEAF

TUME HURU YA TAIFA YA UCHAGUZI
KADI YA MPIGA KURA

Jina Kamili - Full Name
JACKSON J MAGIGE

Tarehe ya Kuzaliwa - Date of Birth
28/05/2001

Jinsi - Sex **ME**

Kata - Ward
HUNYARI

Mtaa/Kijiji - Street/Village
MARIWANDA

Kituo cha Kuandikisha - Registration Centre
STOONI MARIWANDA

Namba ya Mpiga Kura **T-1302-8314-867-1**

KADI HII IMETOLEWA NA TUME HURU YA TAIFA YA UCHAGUZI

TUME HURU YA TAIFA YA UCHAGUZI
MKURUGENZI WA UCHAGUZI
TANZANIA

Kadi hii ni mali ya Tume Huru ya Taifa ya Uchaguzi, huruhusiwi kufanya mabadiliko ya aina yoyote wala kumpatia mtu asiyeruhusiwa kutumia, kama ikipotea au kuharibika toa taarifa ofisi ya Tume Huru ya Taifa ya Uchaguzi

S.L.P 358 DODOMA
Simu: +255 26-2962345-8

TUME YA TAIFA YA UCHAGUZI
KADI YA MPIGA KURA

Jina Kamili - Full Name
MARIA P KATULA

Tarehe ya Kuzaliwa - Date of Birth
[illegible]

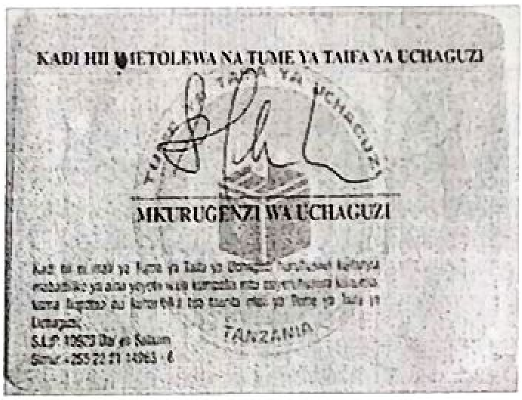
Jinsi - Gender KE

Kata - Ward
ISAMILO

Mtaa/Kijiji - Street/Village
NYAKABUNGO

Kituo cha Kuandikisha - Registration Centre
SHULE YA MSINGI NYAKABUNGO

Namba ya Mpiga Kura T-1004-9783-023-5



KADI HII IMETOLEWA NA TUME YA TAIFA YA UCHAGUZI

MKURUGENZI WA UCHAGUZI

[illegible]
S.L.P. 10923 Dar es Salaam
Simu: +255 22 21 14963 - 6

TANZANIA REVENUE AUTHORITY

ISO 9001: 2015 CERTIFIED

TAX CLEARANCE CERTIFICATE

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

Licencing Authority; TIN :	125-847-269
PHARMACY COUNCIL	
MWENGE	
31818	
DAR ES SALAAM	

Tax Certificate Number: **131-0230-4945**

Issuing Office: Kinondoni
Telephone: 022-2771841
Date of issue: 06 March 2025
Expiry Date: 31 December 2025

Taxpayer Name	**MARIA PAUL KATULA**		
Trading Name			
Taxpayer Identification Number	**138-636-577**	Vat Registration Number	
Company Registration Number			

Business Premises located at :
REGION : DAR ES SALAAM,
DISTRICT : KINONDONI,
STREET : KILUNGULE

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	Freight transport by road

Alfred T. Mregi
COMMISSIONER FOR DOMESTIC REVENUE
06 March 2025

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.

Jamhuri ya Muungano wa Tanzania

United Republic of Tanzania

Pharmacy Council

Exchequer Receipt

Stakabadhi ya Malipo ya Serikali

Receipt No	: **925069315948795**
Received from	: URAFIKI 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 business ownership*	**100,000.00**	
	Total Billed Amount :	**100,000.00 (TZS)**

Bill Reference	: 16212069253437628341
Payment Control Number	: ***991620300063***
Payment Date	: **2025-03-10 12:53:07**
Issued by	: Beatuss Mpogoza
Date Issued	: 2025-03-10 13:42:30
Signature	: .....