



THE UNITED REPUBLIC OF TANZANIA

PCF. 17



MINISTRY OF HEALTH

PHARMACY COUNCIL

NOTICE 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..... RAUYA PHARMACY..... Facility Identification Number (FIN)..... 0100310.....
Physical address:
Street..... Gongo la Mboto..... Ward..... Gongo la Mboto..... District/Municipal..... Ifala..... Region..... Dar-es-Salaam.....

A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL

Full Name..... MWANAINI MWATIMA..... PIN..... 0102905..... Phone..... 0714 476078.....
Address..... Box 65030 Dar-es-Salaam..... Email..... mwanaidmucatma@gmail.com.....

A.3. REASON(s) FOR CHANGE

End of contract

Time frame of notification: (As per Contract)..... 30 days..... Signature..... Mwata Date..... 9/10/2024.....

A.4. OWNER'S DETAILS

Full Name..... IRENE REGAN SHAYO..... Phone Number..... 0713-472839.....
Remarks.....
Signature..... Date..... 09-10-2024.....

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.