

07-01-2025

Registrar,  
Pharmacy Council,  
NHIF Building, 1st Floor, UDOM Road,  
P.O. Box 1277,  
DODOMA.



Dear Sir,

**RE: CLOSURE OF THE BUSINESS OF PHARMACY AT BIOGEN (A) LIMITED – MBAGALA BRANCH**

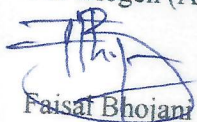
We, Biogen (A) Limited with Business permit no. 00308-2025 authorized to operate as Wholesale Business Only at registered premises with address of P.O. Box 1469 at Plot No.603, Machno, Mbagala, Temeke Municipality/District in Dar es Salaam with FIN No. 0200308 under a superintendent Pharmacist Joel Kibona with Personal Identification Number (PIN) 0101895.

We hereby write to officially notify the closure of our business due to business operation challenges at the stated facility effective from 28<sup>th</sup> February, 2025, where we completed a transfer of all items and equipment to our other branch.

With this letter, we kindly request your assistance in facilitating the procedures necessary for the closure of our business license and any other applicable regulatory requirements. The permit for the business of a pharmacist and letter for ending the supervision role of a pharmacist has been attached herewith for your reference.

Thank you for your cooperation.

For Biogen (A) Limited



Faisal Bhojani  
Managing Director



# PHARMACY COUNCIL



## PERMIT TO OPERATE THE BUSINESS OF A PHARMACIST

Made under Section 37 of the Pharmacy Act Cap. 311

Permit No. 00308-2025

This Permit is hereby granted to M/S Biogen Africa Limited of P.O.Box 1469, Dar es Salaam to operate a Wholesale Only Business at the premises situated/lying between Plot No.603, Machno, Mbagala, Temeke Municipality/District in Dar es Salaam Region with Facility Identification Number (FIN) 0200308 under a superintendent Pharmacist Joel Kibona with Personal Identification Number (PIN) 0101895

Issued in: May 2024

Expires on: 30 June 2025

20-08-2024

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

