



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 LUMO PHARMACY Facility Identification Number (FIN) 0100208
Physical address:
Street AMANI Ward BUZA District/Municipal TEMEKE Region DAR-ES-SALAAM

A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL

Full Name PIN Phone
Address Email

A.3. REASON(s) FOR CHANGE

Assignments of personnel

Time frame of notification: (As per Contract) 7 days Signature [Signature] Date 13/8/2025

A.4. OWNER'S DETAILS

Full Name IRENE MUNGUATOSHA Phone Number 0712 408432
Remarks OK
Signature [Signature] Date 13/8/25

B. TO BE COMPLETED BY THE OWNER ONLY

B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL

Full Name VERONICA CHARLES MANGUBA PIN 0600635 Phone Number 0692772076 Email vernimansul@gmail.com
Physical address:
Street AMANI Ward BUZA District/Municipal TEMEKE Region DAR-ES-SALAAM
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.



BARAZA LA FAMASI



FOMU YA KUKIRI KUTEKELEZA MAJUKUMU YA MWANATAALUMA WA DAWA
KWENYE MAJENGO YA KUTOLEA HUDUMA YA DAWA
(kutoka katika Kifungu No. 44 (1) (a) cha Sheria ya Famasi)

SEHEMU YA KWANZA: - TAARIFA ZA MWANATAALUMA

☐ MFAMASIA ☐ FUNDI DAWA SANIFU ☐ FUNDI DAWA MSAIDIZI ☒ PHARM. DISP

1. Jina la mwanataaluma... VERONICA CHARLES MANGUBE PIN 0600635
2. Namba ya simu... 0692772076 barua pepe Veronica.Mangub@ gmail . com
3. Tarehe ya mwisho kuhuisha jina (Retention).....
4. Je, umehuisa taarifa zako kwenye mfumo kupitia tovuti ya baraza la famasi?

([http://196.45.42.57/pcmis.data/viewmodules/registration/pharmacist-](http://196.45.42.57/pcmis.data/viewmodules/registration/pharmacist-signup.php)

[signup.php](http://196.45.42.57/pcmis.data/viewmodules/registration/pharmacist-signup.php)) ☒ NDIYO, Stakabadhi Na. 92241772844725 ☐ HAPANA

SEHEMU YA PILI: - KUKIRI KWA MWANATAALUMA:

Mimi... VERONICA CHARLES MANGUBE mwenye
taaluma ya dawa ngazi ya PHARMACEUTICAL DISPENSER nakiri kwamba nitafanya
kazi yangu ya kitaaluma katika jengo la kutolea huduma ya dawa liitwalo
LUMO PHARMACY FIN 0100208 lililopo katika
Wilaya ya TEMBEKE Mkoani DAR-ES-SALAAM
Sahihi Mangube Tarehe 13/07/2025

Uthibitisho wa Mfamasia wa Halmashauri

Nadhibitisha kwamba mwanataaluma tajwa ni miongoni/ si miongoni mwa
wanataaluma waliopo katika halmashauri ninayosimamia

Jina na Sahihi YONAH BINGO Tarehe 15/7/2025

Muhuri KNY:
DMO

SEHEMU YA TATU: - UTHIBITISHO WA MAKAZI:

Ithibitishwe na: Afisa Mtendaji

Jina la mtendaji (Kata) MHAMU R. DADI Kata ya BURA

Nadhibitisha kwamba Ndugu VERONICA C. MANGUBE anaishi

langu mtaa/kijiji Shani, kuanzia mwaka 2024

Sahihi Afisa Mtendaji

Tarehe

14/07/2025

Muhuri
Mtendaji

AFISA MTENDAJI
WA S.I. 17/07/2025



File No. 0600635



THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF HEALTH



PHARMACEUTICAL DISPENSING CERTIFICATE

This Certificate is awarded to

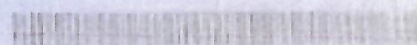
Veronica Charles Mangube

Who has attended and passed One Year Pharmaceutical Technology Course

Conducted at St. Peter's College of Health Sciences from 2013 to 2014

Registrar - Pharmacy Council

Date 29 January 2024



AGREEMENT FOR EMPLOYMENT OF PHARMACEUTICAL DISPENSER

This Agreement is made on this 1st day of July 2025

BETWEEN

IRENE MUNGUATSHA MASHUKE (Hereinafter referred to as the PROPRIETOR) the expression which include his assigns, agents or his legal representative of his business.

AND

VERONICA CHARLES MANGUBE enlisted Pharmaceutical Dispenser who will perform all the technical activities in the Pharmacy under Pharmacist supervision (hereinafter referred to as the Pharmaceutical Dispenser

WHEREAS in Proprietor operates a business of a Pharmacist which is a regulated business under the Act.

WHEREAS in compliance with the Pharmacy "Pharmacy Practice" Regulation 2012 the proprietor wishes to engage the professional services of a Pharmaceutical Dispenser his business,

WHEREAS the Pharmaceutical Dispenser is willing to offer professional services to the proprietor in lieu of remuneration for such services or such other terms and condition as stipulated hereunder.

WHEREAS the proprietor and Pharmaceutical Dispenser are desirous to enter into an agreement, to support operation of a business of a pharmacist.

WHEREAS in the event that the superintendent pharmacist is part time available the Pharmaceutical Dispenser shall be available at full time at the terms and condition as hereinafter appearing.

WHEREAS the parties agree to operate a business of a pharmacist styled as RETAIL Pharmacy.

AND NOW WHEREFORE THIS AGREEMENT WITNESSED AS FOLLOWS,

1. Interpretation

"Act" means the pharmacy Act, Cap 311

"Agreement" means the Agreement between the parties to operate a business of Pharmacist

"Business of pharmacy or pharmacist" include professional pharmacy practice and any activity carried on by a person in relation to medicines, medical devices or herbal medicines:

"Pharmacy means any approved premises wherein or from which any services pertaining to the practice of a pharmacist is provided, and shall include a community Pharmacy, consultant Pharmacy institution Pharmacy or wholesale Pharmacy.

"Proprietor" means an owner of pharmacy and include his assignees, agents or his legal representative.

"Superintendent" means a pharmacist in charge of the business of a pharmacist

"Pharmacist" means a person registered as such under section 16 of the Act.

"Pharmaceutical" Dispenser means a person enlisted such under section 23 of the Act

"Transfer of ownership" means any disposition of ownership of the facility subject of this agreement to a third part either by way of sale, or any other form which has the effect of changing or transferring power of authority of owning of pharmacy to a third person during existence of its operation.

2. Duration of Agreement

This Agreement shall be effective for a period of twelve 12 months, commencing from *1st July 2025*

3. Commencement of supervision

The Pharmaceutical Dispenser shall commence technical assistance of the above named pharmacy on the *1st day of July 2025*

4. Obligation of the Parties

4.1 The proprietor

The proprietor shall have the following duties and responsibilities.

- 4.1.1 The **PROPRIETOR** shall pay Monthly salary/ emoluments of TZS..... *200,000* payable monthly to the **PHARMACEUTICAL DISPENSER** upon discharging his duties and function as per this Agreement at any event, the salary shall not be paid in advance.
 - 4.1.2 The salary/emolument shall be gross of any applicable taxes and/or deductible employment benefits and shall be paid monthly and no later than the 1st day of the following month
 - 4.1.3 Comply with the laws, Regulations Guidelines and standards prescribed by the pharmacy Council and other relevant authorities.
 - 4.1.4 Implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in a high level at all times
 - 4.1.5 Hire other pharmaceutical personnel for providing services or dispensing personnel recognized by the pharmacy Council.
 - 4.1.6 Apply adequate funds necessary to rehabilitating or modifying the premises and maintaining the modern pharmacy practice.
- ### 4.2 The Pharmaceutical Dispenser

At a salary or emolument stipulated in clause 4.1.1 of this agreement, the pharmaceutical dispenser shall with all commitment and professional diligence, take the necessary steps to establish and defiantly perform the duties according to their scope of practice to the said pharmacy, dealing in pharmaceuticals.

The Pharmaceutical Dispenser under personal supervision of a pharmacist

Shall have the following duties and obligations,

- 4.2.1 Shall implement and ensure that standards required for pharmacy and pharmaceutical properties are maintained in high level at all times.
- 4.2.2 Shall ensure services are provided under his or her physical supervision.
- 4.2.3 Shall manage and undertake all technical and professional matters in the pharmacy under supervision of a pharmacist.
- 4.3.4 Shall facilitate capacity building to all pharmaceutical personnel that supervises the pharmacy.

7. Costs

The proprietor shall meet the cost of drawing up this agreement.

8. The laws of Tanzania hereto shall govern the validity, construction and interpretation of this agreement and the rights and duties of the parties.

9. The pharmacy council will accept additional clauses but this agreement is a generic contract for guidance only.

IN WITNES WHEREOF the parties hereto have dully signed and sealed this presents on the date and in the manner herein after appearing.

Signed and delivered by the parties at this 22nd day of November 2024.

SIGNED and DELIVERED

By the said... IRENE MUNGUATOSHA MAMULE

Who is known to me personally.....

Introduced to me by.....

.....the latter known to me personally

This... 01 day of... 07 20... 25

In the presence of

Name... RESPICIUS RENATUS SIMBO

Designation... ADVOCATE

Signature... [Signature]

Date... 01/07/2025



[Signature]

PROPRIETOR

SIGNED and DELIVERED

By the said... VERONICA CHARLES MANGUBE

Who is known to me personally.....

Introduced to me by.....

.....the latter known to me personally

This... 01 day of... 07 20... 25

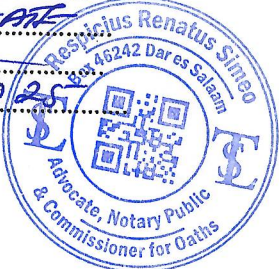
In the presence of

Name... RESPICIUS RENATUS SIMBO

Designation... ADVOCATE

Signature... [Signature]

Date... 01/07/2025



[Signature]

PHARMACEUTICAL DISPENSER