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: KUMYITU PHARMACY FIN 0101267

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

PHYSICAL ADDRESS:

Plot No. ..... Street: ILOMBA Ward. MWAKIBETE

District/Municipal. MBEYA CITY Region: MBEYA

POSTAL ADDRESS: P.O.BOX 1526 MBEYA Contact. No. 0768776084

E-mail: mwandazaire@gmail.com

OWNERSHIP:

Directors (Names): 1. MWANDA D. ZAIRE Qualification: PHARMACIST

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

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

SUPERINTENDANT INFORMATION:

Full Name: MWANDA D. ZAIRE PIN: 0102211

Residential Address: P.O.BOX 1526 MBEYA Tel: ..... Email: mwandazaire@gmail.c

Contract commencement date: 12/07/2024 Cessation date 12/07/2025

SECTION B: PROPOSED CHANGES:

NAME OF THE NEW PREMISES: MWATI PHARMACY

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

PHYSICAL ADDRESS:

Plot No. ..... Street ILOMBA Ward MWAKIBETE

District/Municipal. MBEYA CITY Region MBEYA

POSTAL ADDRESS: P.O.BOX 1526 MBEYA CONTACT. No. 0768776084

NEW OWNERSHIP: (IF DIFFERENT FROM PREVIOUS ONE)

Directors (Names):

1. ..... Qualification: .....
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. For effectively Management of the premises

2. .....

SECTION D: APPLICANT INFORMATION

Name of Applicant: MWANDA · D· ZAIRE

(Contact/email if different from the above)

Address: P·O·BOX 1526 MBEYA Tel: 0768776084 E-mail: mwandazaire@gmail.com

Signature of Applicant..... Date 30/09/2024

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 30/09/2024

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)*

TANZANIA

Form 5

BRELA
BUSINESS REGISTRATIONS AND LICENSING AGENCY

No. 586079

Certificate of Registration

The Business Names (Registration) Act (Cap 213)

I HEREBY CERTIFY THAT **MWATI PHARMACY** this 3rd day of **OCTOBER** year **2024** has been duly registered pursuant to and in accordance with the provisions of the Business Names (Registration) Act and the Rules made thereunder, and has been entered the Number **586079** in the Index of Registration.

GIVEN under my hand at Dar es Salaam this 3rd day of **OCTOBER TWO THOUSAND AND TWENTY FOUR.**

REGISTRAR OF BUSINESS NAMES
TANZANIA

Deputy Registrar Business Names

NOTE – This certificate must be kept in a conspicuous position at the principal place of business. Any change in the particulars originally registered must be notified to the Registrar within twenty eight days.

MKATABA WA KUPANGISHA CHUMBA/VYUMBA VYA BIASHARA VYA NDUGU MAHAVA Y. A VILIVYOPO KATA YA ILOMBA MTAA WA JIHANGA.

Mimi YAIRO A. MAHAVA ..... Nimempangisha Chumba cha biashara Ndugu, MWANDA DAUDI ZAIRE ..... leo tarehe 03.10.2024 ..... kwa makubaliano yafuatayo:-

1. Amekubaliana/tumekubaliana kunilipa kiasi cha Tshs. 20,000/= (kwa maneno) ISHIRINI ELFU TU kwa kila mwezi, hivyo ametoa kiasi cha Jumla ya Tshs. 60,000/= (kwa maneno) SITINI ELFU TU. ni kwa ajili ya miezi MITATU (03) toka mwezi wa 03.10.2024 hadi mwezi wa 03.07.2025 mwaka 2025
2. Mpangaji atatakiwa kulipa fedha (Kodi) kwanza ndipo aingie na kuanza kufanya biashara yake, hivyo na mwanzoni mwa mwezi wa mwisho wa mkataba anatakiwa kulipa tena, akishindwa atatakiwa kunikabidhi chumba kwa mimi mwenye chumba/vyumba.
3. Bei za vyumba zitabadilika kutokana na kupanda kwa gharama na sababu nyinginezo kulingana na wakati na kwa makubaliano.
4. Mpangaji atatakiwa kulipa bili za umeme, kununua umeme kwa wakati na nitofauti na fedha au kodi ya kawaida ya chumba alizotoa, pia maji atanchangia.
5. Nitaheshimu haki za mpangaji ikiwa ni pamoja kumpatia NOTES ya siku MIEZI MIWILI mpangaji msumbufu, mgomvi, tabia za kukera wengine atatakiwa kukabidhi chumba na kuondoka.
6. Mpangaji atatakiwa kuwa mwumini wa kutunza mazingira ya chumba hicho na usafi pia.
7. Matumizi ya umeme yawe ya kiungwana na ambapo hauhitajiki uzimwe.
8. Yote hapo juu yataheshimiwa na mpangishaji na mpangaji.
9. Wapangaji watakiwa kumtafuta mlinzi na kumlipa kwa ushirikiano.

MASHAHIDI WA MKATABA HUU NI:-

- SAHIHI YA MPANGISHAJI (MWENYE NYUMBA) Mahava.
- SAHIHI YA MPANGAJI
- SAHIHI YA SHAHIDI (SHUHUDA) MWINGINE

Form 21

TANZANIA

BRELA
BUSINESS REGISTRATIONS AND LICENSING AGENCY

Extract date and time: 03/10/2024 12:49:53
Registration date and time: 03/10/2024 12:49:48

The Business Names (Registration) Act (Cap 213)

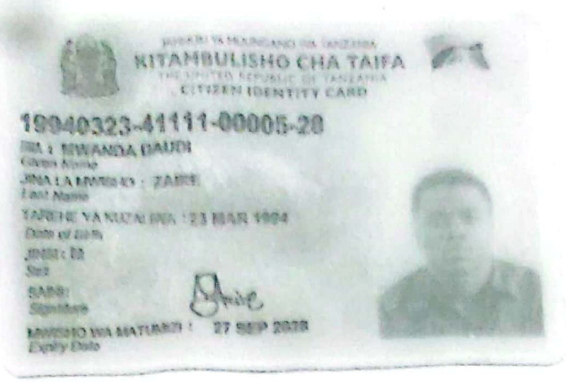
Extract from Register

1.	**Name of Business:**	**MWATI PHARMACY**
2.	**Registration number:**	**586079**
3.	**Principale Place of Business:**	Region Mbeya, District Mbeya CBD, Ward Mwakibete, Postal code 53122, Near CCM, Ilomba
4.	**Contacts:**	Email mwandazaire@gmail.com, Phone 0768776084, P.O.Box 1526
5.	**Business activity:**	8620 - Medical and dental practice activities, Main activity 4663 - Wholesale of construction materials, hardware, plumbing and heating equipment and supplies, Main activity 4772 - Retail sale of pharmaceutical and medical goods, cosmetic and toilet articles in specialized stores, Main activity
6.	**Propriator/Partners:**	MWANDA DAUDI ZAIRE
7.	**Authorized to Operate Bank Account etc:**	MWANDA DAUDI ZAIRE

REGISTRAR OF BUSINESS NAMES *TANZANIA*

Deputy Registrar Business Names

Information printed from the Register of Business Names is true and complete as per extract generation date and time. Please be advised to refer to the Online Registration System at BRELA (ors.brela.go.tz) for an up-to-date information regarding given Business Name.



KITAMBULISHO CHA TAIFA
THE UNITED REPUBLIC OF TANZANIA
CITIZEN IDENTITY CARD

19940323-41111-00005-28

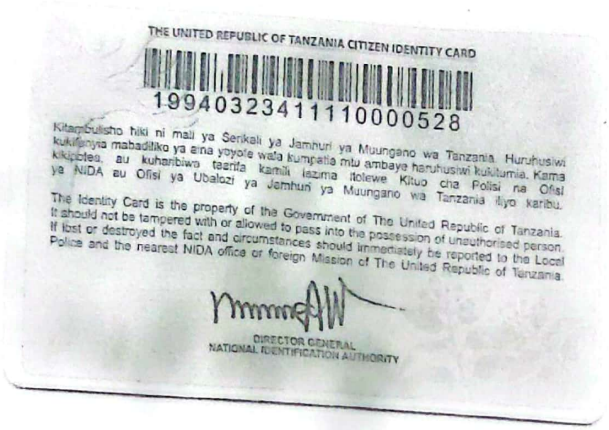
JINA LA MWISHO : ZAIDI
Last Name

TAREHE YA KUZALIWA : 23 MAR 1994
Date of Birth

JINSI : M
Sex

SAINI:
Signature

MWISHO WA MATUMIZI : 27 SEP 2028
Expiry Date



THE UNITED REPUBLIC OF TANZANIA CITIZEN IDENTITY CARD

19940323411110000528

Kitambulisho hiki ni mali ya Serikali ya Jamhuri ya Muungano wa Tanzania. Huruhusiwi kukifanya mabadiliko ya aina yoyote wala kumpatia mtu ambaye haruhusiwi kukitumia. Kama kikipotea, au kuharibiwa taarifa kamili iazima itolewe Kituo cha Polisi na Ofisi ya NIDA au Ofisi ya Ubalozi ya Jamhuri ya Muungano wa Tanzania iliyo karibu.

The Identity Card is the property of the Government of The United Republic of Tanzania. It should not be tampered with or allowed to pass into the possession of unauthorised person. If lost or destroyed the fact and circumstances should immediately be reported to the Local Police and the nearest NIDA office or foreign Mission of The United Republic of Tanzania.

DIRECTOR GENERAL
NATIONAL IDENTIFICATION AUTHORITY

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:
231-0216-9555

Issuing Office: Mbeya
Telephone: 025 2502165
Date of issue: 30 September 2024
Expiry Date: 31 December 2024

Taxpayer Name	**MWANDA DAUDI ZAIRE**		
Trading Name			
Taxpayer Identification Number	**153-614-040**	Vat Registration Number	
Company Registration Number			

Business Premises located at :
REGION : MBEYA,
DISTRICT : MBEYA,
STREET : MWAKIBETE

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	Retail sale of pharmaceutical and medical goods, cosmetic and toilet articles in specialized stores

Alfred T. Mregi
COMMISSIONER FOR DOMESTIC REVENUE
30 September 2024

Disclaimer :

1. This certificate is issued free of charge