



THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH

PHARMACY COUNCIL

PCF. 17



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..... E.B.E. PHARMACY Facility Identification Number (FIN)..... D103086
Physical address:
Street..... NSALAGA Ward..... NSALAGA District/Municipal..... MBEYA Region..... MBEYA

A.2. DETAILS OF SUPERINTENDENT/OTHER PHARMACEUTICAL PERSONNEL

Full Name..... VALENTINO VENANCE MLESSA PIN..... 0406758 Phone..... 0655696857
Address..... MBEYA Email..... faney.mlessa.9619@gmail.com

A.3. REASON(S) FOR CHANGE

occupational change.

Time frame of notification: (As per Contract) 7 days Signature..... [Signature] Date..... 21/11/2024

A.4. OWNER'S DETAILS

Full Name..... BEATRICE RICHARD NGENDE Phone Number..... 0718616591
Remarks..... APPROVED
Signature..... [Signature] Date..... 21/11/2024

B. TO BE COMPLETED BY THE OWNER ONLY

B.1. NEW SUPERINTENDENT / OTHER PHARMACEUTICAL PERSONNEL

Full Name..... MURU YUSUPH PIN..... 07390 Phone Number..... 0765990363 Email..... muru.yusuphally@gmail.com
Physical address:
Street..... NYIBUKO Ward..... IYELA District/Municipal..... MBEYA Region..... MBEYA
Details of Previous pharmacy:
Name of Pharmacy..... E.B.E. PHARMACY FIN..... D103086 District/Municipal..... MBEYA Region..... MBEYA

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.