TMHS
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- Medical Supplies
- Remote Medical Clinics
- Emergency Medical Services
- Health and Safety Consultancy
- Waste and Environment Management

21/11/2023

TMHS/OUTDAR/2023/162

TO:

PHARMACY COUNCIL

P.O.BOX 31818

DAR ES SALAAM

PHARMACY COUNCIL RECEIVED 22 DEC 2023 P.O. Box 31818, DAR ES SALAAM

Dear Sir/Madam

REF: REQUEST OF PERMIT WITHDRAW TO OPERATE BUSINESS AT TMHS PHARMACY – WAZO HILL.

With respect to the subject matter above, we TMHS pharmacy – wazo hill with the permit registration number 02273 and facility identification number (FIN) 0102273, which was under superintendent Shabani Khamis Mustapha with personal identification number (PIN) 0103434.

We are writing this letter to request your board to withdraw permit to operate a retail pharmacy at TMHS pharmacy – wazo hill as we are going to close the premise on 23rd November 2023. All of our medicine they will be transferred TMHS Pharmacy plot no 1112, mikocheni, kinondoni. Hopefully our request will be granted.

Yours

Dr. Chakou Halfani

Managing director

TINDWA MEDICAL AND HEALTH SERVICES 21 NOV 2023 P.O. Box 31409 DAR ES SALAAM

PHARMACY COUNCIL

PERMIT TO OPERATE THE BUSINESS OF A PHARMACIST

Made under Section 37 of the Pharmacy Act Cap. 311

Permit No. 02273

This Permit is hereby granted to M/S ***TMHS Pharmacy - Wazo Hill*** of to operate a ***Retail Only Business*** at the premises situated/lying between ***Plot No.80, Wazo Hill Street, Wazo, Kinondoni*** Municipality/District in ***Dar es Salaam*** Region with Facility Identification Number (FIN) ***0102273*** under a superintendent Pharmacist ***Shaban Khamis Mustapha*** with Personal Identification Number (PIN) ***0103434***

Issued in: ***September 2022***

Expires on: ***30 June 2024***

27-07-2023

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 medicine 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***

PHARMACY COUNCIL

PREMISES REGISTRATION CERTIFICATE

Made under Section 34 (1) of the Pharmacy Act Cap.311

FIN: 0102273

This is to certify that the premises owned by M/S ***TMHS Pharmacy - Wazo Hill*** of ***P.O.Box 31409, Dar es Salaam*** located at ***Plot No.80, Wazo Hill Street, Wazo, Kinondoni*** Municipality/District in ***Dar es Salaam*** Region has been registered for ***Retail Only*** to sell pharmaceutical and related products with Facility Identification Number (FIN) ***0102273***

Issued in: ***September 2022***

Expires on: ***30 June 2027***

Registrar Pharmacy Council P. O. Box 1277 Dodoma

13-10-2022

DATE:

SIGNATURE OF REGISTRAR AND STAMP

CONDITIONS

1. ***The premises and the manner in which the business is conducted must conform to the category of pharmacist business registered***
2. ***This certificate does not authorize the holder to sell or supply medicines, medical devices and diagnostics illegally to unlicensed premises***
3. ***Any changes such as ownership, superintendent pharmacist, business name, physical address and location of the registered premises shall be approved by the Pharmacy Council***
4. ***This certificate is non transferable to other premises or to any other person***
5. ***Both certificate and business permit shall be displayed conspicuously in the registered premises***