

SHIDA SAMWEL KAPALATUS

S.L.P 1006,

KATORO - GEITA.

17 FEBRUARI 2025.

MSAJILI BARAZA LA FAMASI,

S.L.P 1277

DODOMA – TANZANIA.

YAH: -KUIFUNGA S.K PHARMACY

Rejea mada tajwa hapo juu yahusika.

Mimi ni Shida Samwel Kapalatus mmiliki wa S.K Pharmacy FIN:- 0300159 wauzaji wa jumla na reja reja iliyopo mtaa wa Bugayambelele kata ya Katoro wilaya ya Geita vijijini. Kutokana na changamoto za kibiashara nimeamua kuifunga S. K Pharmacy kuanzia tarehe 18 Januari 2025.

Naomba kuwasilisha.

 0746390055

Shida Samwel Kapalatus

Mmiliki wa S.K Pharmacy.

PHARMACY COUNCIL



PERMIT TO OPERATE THE BUSINESS OF A PHARMACIST

Made under Section 37 of the Pharmacy Act Cap. 311

Permit No. 00159-2024

This Permit is hereby granted to M/S S.K Pharmacy of P.O.Box 1006, Geita to operate a Retail and Wholesale Business at the premises situated/lying between Bugayambelele Street, Katoro, Geita Municipality/District in Geita Region with Facility Identification Number (FIN) 0300159 under a superintendent Pharmacist Projestus Nestory Tehingisa with Personal Identification Number (PIN) 0101190

Issued in: April 2015

Expires on: 30 June 2025

10-07-2024

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



PHARMACY COUNCIL



PREMISES REGISTRATION CERTIFICATE

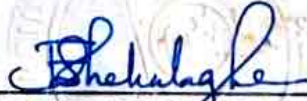
Made under Section 34 (1) of the Pharmacy Act Cap.311

FIN: 2501011003

This is to certify that the premises owned by M/S S.K. Pharmacy of P.O.Box 1006, Geita located at Bugayambele Street Katoro Geita Municipality/District in Geita region have been registered for Retail Pharmacy for Selling Pharmaceutical Products with Facility Identification Number (FIN) **2501011003**

Issued on: April 2015

30th April 2015
DATE:


**SIGNATURE OF REGISTRAR
AND STAMP**

CONDITIONS

1. The premises and the manner in which the business is to be conducted must conform to requirements of the Pharmacy Act Cap. 311 or any other written law related to the premises registration at all times; failure of which will cause this certificate be suspended, revoked or cancelled
2. The Council reserves the right to suspend, revoke or cancel any certificate or permit issued under the Act
3. Any Change in the ownership, business name 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. This certificate shall be displayed conspicuously in the registered premises

No	DESCRIPTION	UOM	QUANTITY
29	Chest of tab	P/100	18
30	Alben tab	P/60	16
31	Meththoplus	BTL	612
32	Mifupan tab	P/100	23
33	Diclopar MR	P/100	20
34	Baby grip water synp	BTL	136
35	Duo cortexin tab	P/9	19
37	Diclopar Tabs	P/100	32
38	Promethazine tabs	P/100	25
39	Promethazine Injection	AMP	100
40	Grip water wood ward	BTL	49
41	Good morning synp	BTL	113
42	Asu synp	BTL	35
43	Ketax tabs	Box	11
44	Mucolyn Synp Adult	BTL	46
45	Mucolyn synp Pediatric	BTL	34
46	Aduprist tablet	P/100	14
47	Cotton wool 500g	Roll	09
48	Dr cold synp	BTL	42
49	Totolyn Synp	BTL	42
50	Misoprostol tab	P/4	87
51	P2 tab	P/2	172
52	Sildenetip (Silment)	Tabs	75
54	Metronidazole synp	BTL	156
55	Haba BBE	BTL	93
56	Hydrogen mouth wash	BTL	96
57	Calamine lotion	BTL	67
58	Dawa ya mba	BTL	53
Bridhaa zimopokabua na			

075814894

KUTOKA S.K PHARMACY

JINA LA MMILIKI: SHIDA S. KAPALATU

18/11/2025

100

No	DESCRIPTION	UOM	QUANTITY
01	Alu Tab (Glumec) 24x1	750 DOSE	28
02	Alu Tab (Latam) 24x1	540 DOSE	08
03	Alu tabs (Laliet) 24x1	540 DOSE	06
04	Alu tabs P/30 24x1	P/30	05
06	Cephalexin Caps 250mg	100CP	120
07	Fast Trust Rily	P/280	80
08	Gauze bandage 90x100	Each	10
09	Surgical glove	50PR	12
10	Furcamox Capsule Syrup	Bottle	07
11	Clar Clarithromycin	7TB	05
12	Amoxicillin Capsule 250mg	100TB	44
13	Gentamycin Injection	Each	300
14	Ampicillin Capsule	100 Cap	87
15	Ibuprofen tablet	100TB	360
16	Metronidazole tab 200mg	100TB	293
17	Dr Cold	P/100	34
18	SKTONE Syrup	BTL/Carton	05
19	Laetin tablet	Dose	200
20	Sulphadiazine tab	P/90	16
21	Unitrim Syrup	P/72	01
23	Hekotasi	P/100	11
24	Rece Rezer Gely	BTL	28
25	Mucogely Syrup	BTL	20
26	Goldril Capsule	P/100	02
27	Metronidazole Injection	BTL/vial	172
28	Examination glove	50PR	94

