



FORM 3
[See rule 8]
Certificate Of Registration
ART bank
(To be issued in duplicate)



CERTIFICATE NO.:- GJ/ST/ART BANK/2024/028

1. In exercise of the power conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) ACT, 2021 the District Appropriate Authority and CDMO Surat hereby grants registration to the ART Bank named below for purposes of carrying out Assisted Reproductive Technology procedures as per the aforesaid Act for a period of 5 (five years) ending on 28/07/2029


(a) Name and address of the ART Bank:- **FUSION BIOCELL ART BANK, Shop No:19,20
3rd FLOOR.SHEETAL SHOPPING COMPLEX
OLD ELBEE CINEMA BHATAR ROAD,SURAT**

Sr.No.	Name of the Post	Name of the Staff	Qualification	Registration No.
1	/ Gynecologist	Dr Meghna Jarag	MD, DGO	G-12484
2	Embryologist/ Director	Dr Nehal D Naik	MSc Micro	
3	Andrology/ Counselor	Dr Mukti Vaghela	B.H.M.S	G-6340

(b) Type of institution(Govt./Private) :- Private

2. This registration is granted subject to the aforesaid Act and Rules there under and any contravention there of shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of five years
3. District Registration No. allotted: GJ/ST/ART BANK/2024/028
4. For renewed Certificate of Registration only :-.....

Period of validity of earlier Certificate of Registration from..... to.....


**DISTRICT APPROPRIATE
AUTHORITY
ART(REGULATION)ACT, 2021
AND C.D.M.O./CIVIL SURGOEN SURAT**

Date :-29/07/2024

District:- Surat

Display one copy of this certificate at a conspicuous place at the place of business.

*Strike out whichever is not applicable or necessary