## FORM 3

## [ See Rule 8]

## Certificate of Registration ART Clinic (Level 1/Level 2) / ART Bank (To be issued in duplicate)

1.In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation)act, 2021 the District Appropriate Authority GUJARAT 'STATE, hereby grants registration to the ART Clinic Named below for purposes of carrying out Assisted Reproductive Technology procedures as per the aforesaid Act, for a period of Dt: 13/07/2023 Ending on Dt: 12/07/2028 (a)Name And Address of the ART Clinic:-...

Sr.	Name of the Post	Name of the		
No		Name of the staff	Qualification	Registration No.

(b) Type of institut	ion (Government	
(c) Tune of facility	(Covernment or Private) and	<u> </u>
(c) Type of facility	- (Level 1 or Level 2) -	
	and a manufacturent	

OR

The ART bank named below for purposes of carrying out activities and procedures as per the aforesaid Act, for a period of Dt: 13/07/2023 Ending on Dt: 12/07/2028 (a)Name and address of the ART Bank:- Vani IVF Centre

25, Asmita Society Near Kashivishwanath Mahadev Temple Maninagar East Ahmedabad Gujarat 380008

(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
- 3. District Registration No allotted:- GS/AHD/010

4. For renewed Certificate of Registration only:-	
Period of validity of earlier Certificate of Registration from	D00
, and the contract of Registration from	To

AUTHORITY ART (REGULATION) ACT, 2021 AND C.D.M.O.CUM CIVIL SURGOEN, GENREAL HOSPITAL SOLA, AHMEDABAD.

District :- AHMEDABAD. Date:- .....

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

\*Strike out whichever is not applicable or necessary.