FORM 3

ART clinic (Level 1/Level 2)/ART bank (To be issued in duplicate) Certificate Of Registration [See rule 8]

Certificate No.: TS/AC/2024/15238/L2/NIZAMABAD/381

out Assisted Reproductive Technology procedures as per the aforesaid Act, for a period Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority Telangana State hereby grants registration to the ART Clinic named below for purposes of carrying exercise .04 .2025 ending on 09 .04 .2030 of the powers conferred under Section 16 Ξ of the Assisted

CENTRE (a) Name and address of the ART Clinic; SRI INDUR MOTHERHOOD FERTILITY

Near Munnurkapu Kalyana Mandapam, Pragathinagar, Srinagar Colony, Nizamabad

APMC/FMR/8/155	OBGYN	Dr Tejaswi K	Gynaecologist	_
(if applicable)	MBBS, Diploma in	Dr Hoisseyi K	Post	
Registration No	Qualification	Name of the Staff	Name of the	SNO

- (b) Type of institution (Government or Private) and; Private
- Type of facility: Level 2

per the aforesaid Act, for a period of.....
(a) Name and address of the ART Bank; The ART Bank named below for purposes of carrying out activities and procedures as ending on

- Type of institution (Govt. / Private).
- 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. This registration is granted subject to the aforesaid Act and Rules there under and
- Registration No. allotted: TS/AC/2024/15238/L2/NIZAMABAD/381
- Registration from For renewed Certificate of Registration only: Period of validity of earlier Certificate of

Signature, Name and Designation of the Appropriate Authority

Assisted Reproductive TechnologySilepAldtion) Chair Person & State Appropriate Authority Surrogacy (Regulation) Act, Telangana State

Date:

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.2025

Place: Hyderabad

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

Strike out whichever is not applicable or necessary