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/2024/15651/L1/RANGAREDDY/363

Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority Telangana out Assisted Reproductive Technology procedures as per the aforesaid Act, for a period State hereby grants registration to the ART Clinic named below for purposes of carrying = exercise .2025 ending on 26 of the powers conferred .2030 under Section 16 3 of the Assisted

Healthcare Pvt Ltd) (a) Name and address of the ART Clinic; Nova IVF Fertility (A Unit of Rhea

Dwarakapuram, Sooranagar (V) Ranga Reddy District 500035 H. No.11-13-1099/3,3rd Floor, AYP Tower, Victoria Memorial Metro Station,

42632	MD OBGYN	Dr. Chirumamilla Lakshmi	Director & Gynaecologist	_
Registration No	Qualification	Name of the Staff	Name of the Post	S.No.

- **b** Type of institution (Government or Private) and; Private
- (c) Type of facility: Level 1

OR.

The ART Bank named below for purposes of carrying out activities and procedures as ending on

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

- 3. Registration No. allotted: TS/AC/2024/15651/L1/RANGAREDDY/363
- Registration from . 4. For renewed Certificate of Registration only: Period of validity of earlier Certificate of ð

Signature, of the Appropriate Authority Name and Designation

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

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

Place: Hyderabad

Date: 27

* Strike out whichever is not applicable or necessary