## FORM 3 [ See Rule 8] Certificate of Registration ART Clinic (Level 1/Level 2) / ART Bank (To be issued in duplicate)

Certificate No.: GS/AHD/004

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:- Motherhood Women's & Child Care Hospital Pvt. Ltd.

1st Floor, Sarjan Acrade, Above Axis Bank, Science city Road
Sola, Ahmedabad - 380060

Sr. No	Name of the Post	Name of the staff	Qualification	Registration No.
1	Gynecologist	Dr Rajesh Punjabi	M.D. Gynec	G-7337
2	Gynecologist	Dr Shital Punajbi	M.D. Gynec	G-7447
3	Gynecologist	Dr Anand Patel	D.G.O	G-15408
4	-Embr/clogist	Mr. Yuvrajsinh Thakore	M.Sc in Clinical Embryology	
5	Anestheist	Dr Ranjak Patel	D.A.	G-25864
6	Andrologist	Dr Sneh Shah	M.S. General Surgery	G-17018
7	Nursing Staff	Ms Shweta Sutaria	GNM	A-I/H-I-30475

- (b)Type of institution (Government or Private) and :- Private
- (c) Type of facility :- (Level 1 or Level 2) :- ART CLINIC LEVEL-2

OR

The ART bank	named below for p	urposes of	carrying out	activities	and procedures	as per the
aforesaid Act,						

tor a period of	ading on
(a)Name and address of the ART	Bank:

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:-

0...

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

District :- AHMEDABAD Date:- 13/07/2023

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

\*Strike out whichever is not applicable or necessary.

· Pecited on

MOTHERHOOD WOMEN'S & CHILD CARE HOSPITAL PVT. LTD.

AUTHORISED SIGNATORY