



Health & Family Welfare  
Department  
Government of Gujarat

**JAMNABAI GENERAL HOSPITAL, VADODARA**

NEAR MANDVI, PANIGATE ROAD, VADODARA 390017

PHONE NO. (0265) 2517400, 2517915-16-19-20,

FAXNO. (0265)2518134

Email: co-health-jamna-vad@gujarat.gov.in



**FORM 6**

**Certificate of Registration**

**ART Clinic (Level-2)**

**Certificate No. : JHV/ART/01/23-24**

1. In exercise of the power conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) Act, 2021 the Appropriate Authority **CHIEF DISTRICT MEDICAL OFFICER CUM CIVIL SURGEON, JAMNABAI GENERAL HOSPITAL, VADODARA** 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 **20/07/2023** ending on **19/07/2028**.
  - a) Name and Address of the ART Clinic : **HOPE FERTILITY AND IVF CLINIC, ISHA HOSPITAL,SARABHAI CAMPUS SARABHAI MAIN ROAD BEHIND,ATLANTIS LN,VADOARA,GUJARAT-390007**
  - b) Name of application for registration : **ISHA MULTISPECIALITY HOSPITAL**
  - c) Name of Director of the ART Clinic : **DR. AJAY VALIA**
  - d) Type of Institution (Govt./Private) : **PRIVATE**
  - e) Type of Facility : **ART CLINIC Level-2**
2. This registration is granted subject to the aforesaid Act and Rules there under and any contravention thereof shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of five years.
3. Registration No. Allotted : **JHV/ART/01/23-24**
4. For renewed Certificate of Registration only :  
Period of validity of earlier Certificate of Registration: **NOT APPLICABLE**



*me*  
DISTRICT APPROPRIATE  
AUTHORITY  
ART (REGULATION) ACT, 2021  
&  
CHIEF DISTRICT MEDICAL OFFICER  
CUM CIVIL SURGEON  
JAMNABAI GENERAL HOSPITAL,  
VADODARA

DATE: 20/07/2023

PLACE: VADODARA

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

THE KALUPUR  
OLD PADRA ROAD  
54, PUNIT NAGAR SOCIETY , OPP VACCINE INSTITUTE ,  
GUJARAT , INDIA  
Phone : 0265 2354367  
Fax : 2332894

Date :17-05-2023 15:

To

ISHA HOSPITAL  
A-23 GULABVATIKA DUPLEX , OLD PADRA ROAD  
VADODARA , GUJARAT  
INDIA  
390015  
Phone : 9825061950  
Customer ID : 20823227

**REMITTANCE ADVICE**  
Payment Order Ref:- 000018814901

We confirm having received your request for outward payment on 17-05-2023, details are given  
The current status of the payment **PROCESSED**

If you have a query or need any clarification on this payment, you may:

- Call our 24-hour Customer Care - 0265 2354367 or
- Call your Relationship Manager - 0265 2354367 or
- Log in to your account online and forward your query

Please quote Payment Order reference in all your communications.

Payment Mode	Account Transfer	Amount Details	
Debit Account	02420100757	Remittance Amount	INR 200000.00
Remittance Details		Total Charges	INR 0.00
Remittance Amount	INR 200000.00	Total Amount Paid	INR 200000.00
Forward Contract Ref		Beneficiary Bank Details	
Processing Date	17-05-2023	Bank Name	
Exchange Rate applied	1.0000	Bank Identifier Code	SBIN0000324
BeneficiaryDetails		Address	
BeneficiaryName	CHIEF DISTRICT MEDICAL		
Address		Benf Bank Country	IN
		Method of Payment	RTGS

Please note that all payment are processed subject to Bank's terms and conditions