



**FORM 3**  
[See rule 8]-  
**Certificate Of Registration**  
**ART clinic (Level 1/Level 2) /ART bank**  
**(To be issued in duplicate)**



**Certificate No:-GJ/ST/ART L2/2024/022**

1. In exercise of the power conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) ACT, 2021 the District Appropriate Authority and CDMO Surat 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 5 (five years) ending on 01/02/2029

(a) Name and address of the ART Clinic:- **CANDOR IVF CENTER PVT. LTD.,  
PLOT NO. 1, B/S GEB POWER HOUSE,  
KAPODARA CHAR RASTA, SURAT**

Sr.No.	Name of the Post	Name of the Staff	Qualification	Registration No.
1	Director/	Dr Jaydev Dhameliya	MBBS, MD, DGO	G-16209
2	Gynecologist	Dr Shivani Shah	M.S (O & G)	G-28061
3	Embryologist	Dr Juhi Dhameliya	BDS	A-6742
4	Andrologist	Dr Chetan Sheladiya	DNB (GENITO URINARY)	G-21928
5	Anesthetist	Dr Kishor Rupani	MD(ANAESTHESIOLOGY)	G-15191
6	Counselor	Dr Kiran Dhameliya	BHMS	G-13367
7	Staff Nurse	Ms Riyaben Raut	D.G.N.M	A-II/H-II-28980

(b) Type of institution (Government or Private):- **Private**

(c) Type of facility (Level 1 or Level 2) :- **Level 2**

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 period of five years

3. District Registration No. allotted: **GJ/ST/ART L2/2024/022**

4. For renewed Certificate of Registration only :-.....

Period of validity of earlier Certificate of Registration from..... to.....

**DISTRICT APPROPRIATE  
AUTHORITY  
ART(REGULATION)ACT, 2021  
AND C.D.M.O./CIVIL SURGEON SURAT**



District:- Surat

Date:- 01/02/2024

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

\*Strike out whichever is not applicable or necessary

*Phednis*  
7016325262  
23/10/24