



FORM 3

[See rule 8]

Certificate of Registration

ART clinic (Level 1/Level 2)-ART bank
(To be issued in duplicate)

Certificate no. AP/AC/2022/12918/L1/EAST GODAVARI/95

1. In exercise of the powers conferred under Section 16 (i) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority hereby grants registration to the ART Clinic named below for purposes of carrying on Assisted Reproductive Technology procedures as per the aforesaid Act, for a period of **Five years** from 06-03-2023 to ending on **05-03-2028**.

(a) Name and address of the ART Clinic: London IVF Center, Lakkakula Ramarao Street
• Gandhipuram, Rajamahendravaram
Pin Number: 533103

(b) Type of institution (Govt. or Private): Private

(c) Type of facility (Level 1 or Level-2): Level1

OR

The ART Bank named below for purposes of carrying out activities and procedures as per the aforesaid Act for a period of **NOT APPLICABLE** ending on **NOT APPLICABLE**

Name and address of the ART Bank: **NOT APPLICABLE**

(a) Type of institution (Govt. / Private): **NOT APPLICABLE**

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. Registration No. allotted: **AP/AC/2022/12918/L1/EAST GODAVARI/95**

4. Period of validity of earlier Certificate of Registration (for renewed Certificate of Registration only) from NIL to NIL



Signature, Name and Designation of
the Appropriate Authority

SEAL

VICE CHAIRMAN
District Appropriate Authority &
District Medical & Health Officer
Surrogacy & ART Act 2021
East Godavari District
Rajamahendravaram

Date 06-03-2023

Place: Rajamahendravaram

Display one copy of this certificate at a conspicuous place at the place of business
***Strick out whichever is not applicable or necessary**