

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/2022/13707/L1/TIRUPATI/209

17. 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 26.12.2023 ending on 25.12.2028

a. Name and address of the ART Clinic : **GAYATHRI HOSPITAL,
485,VVMAHALROAD,BESIEDS
LALITHA JEWLLERY'S TIRUPATI ,TIRUPATI DISTRICT**

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

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

OR

The ART Bank named below for purposes of carrying out activities and pprocedures as per the aforesaid Act for a period of Not Applicable ending on Not Applicable


(m) Name and address of the ART Bank: Not Applicable

(n) Type of institution (Govt. / Private): Not Applicable

18. 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.

19. Registration No. allotted: AP/AC/2022/13707/L1/TIRUPATI/209

20. 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,
District Medical & Health Officer,
SEAL
Vice Chairman, ART & Surrogacy Act-2021
Date: _____
Tirupathi District.

Place: Tirupati

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