FORM 3

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

Certificate No.: TS/AC/2023/14630/L1/SANGA REDDY/298

- out Assisted Reproductive Technology procedures as per the aforesaid Act, for a period State hereby grants registration to the ART Clinic named below for purposes of carrying Reproductive Technology (Regulation) Act, 0) .03 .2024 ending on exercise of the powers 28. conferred .2029 2021, the Appropriate Authority Telangana under Section 16 (1) of the Assisted
- (a) Name and address of the ART Clinic, MNR Medical college Hospital

Fasalwadi, Narsapur Road, Sanga Reddy

S.No.	_
Post Post	Director & Gynaecologist
Name of the Staff	Dr N. Bhavani
Qualification	M.S OBGYN
Registration No (if applicable)	39204

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

per the aforesaid Act, for a period of ... (a) Name and address of the ART Bank (b) Type of institution (Govt. / Private). The ART Bank named below for purposes of carrying out activities and procedures as ending on

- registration before the expiry of the said period of five years any contravention there of shall result in suspension or cancellation of this certificate of This registration is granted subject to the aforesaid Act and Rules there under and
- Registration No. aliotted: TS/AC/2023/14630/L1/SANGA REDDY/298
- Registration from For renewed Certificate of Registration only. Period of validity of earlier Certificate of

Signature, Name and Designation of the Appropriate Authority

Assisted Reprod Chair Person & State Appropriate Authority Surrogary (Regulation) Act, Telengare State

SEAL

Date 01.03.2024

Place: Hyderabad

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

Strike out whichever is not applicable or necessary