## FORM 3

[ See Rule 8]

## Certificate of Registration ART Clinic (Level 1/Level 2) / ART Bank

(To be issued in duplicate)

Certificate No.: GS/AHD/077

1.In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) act,2021 the District Appropriate Authority GUJARAT STATE 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 Dt: 27/03/2024 Ending on Dt: 26/03/2029

(a) Name And Address of the ART Clinic:- MARIGOLD WOMENS HOSPITAL D BLOCK, 4THFLOOR, 4019 TO 4024 TRP MALL BRTS ROAD, CENTRAL BOPAL AHMEDABAD 380058

Sr. No	Name of the Post	Name of the staff	Qualification	Registration
01	Director	Dr. DEVANG KANUGA	MD, DGO	G- 6623
02	Gynecologist	Dr CECIL KANUGA	MD, DGO	G-6624
03	Gynecologist	Dr. RACHIT PATEL	MBBS DNB	G-24747

(b)Type of institution (Government or Private) and... Private

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

The ART bank name	d hala d
for a seried of	d below for purposes of carrying out activities and procedures as per the aforesaid Act
A	
(a)Name and add	ress of the ART Bank:-
(o) Type of institu	Ition (Govt. / Private):-
2. This registration is gran	ited subject to the aformula to
shall result in suspension of five years.	nted subject to the aforesaid Act and Rules there under and any contravention there of on or cancellation of this certificate of registration before the expiry of the said period
3. District Registration No	allotted:
4. For renewed Certificate	e of Registration only:
Period of validity of	The registration only.
renoción validity of ear	rlier Certificate of Registration from To To
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	1. visoni

DISTRICT APPROPRIATE AUTHORITY ART (REGULATION) ACT, 2021 AND C.D.M.O.CUM CIVIL SURGOEN, GENERAL HOSPITAL SOLA, AHMEDABAD.

District :- AHMEDABAD. Date: 27/03/2024

4.

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

\*Strike out whichever is not applicable or necessary.