



**GOVERNMENT OF PUDUCHERRY**  
(The Assisted Reproductive Technology (Regulation) Act, 2021)

FORM 3  
[See rule 8]

**CERTIFICATE OF REGISTRATION**  
**ART CLINIC (LEVEL 1)**

**Certificate No : 11**

1. In exercise of the powers conferred under Section 16(1) of **The Assisted Reproductive Technology (Regulation) Act 2021**, **The Appropriate Authority, The Director, Directorate of Health and Family Welfare Services, Puducherry** 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 **five years** ending on **01.06.2029**

- (a) **Name and Address of the ART Clinic** : **KARUNYA CLINIC,**  
No.65, Third Cross Street,  
Venkata Nagar,  
Puducherry - 605 011.
- (b) **Type of Institution(Govt or Private)** : **PRIVATE**
- (c) **Type of facility** : **LEVEL 1**

**DETAILS OF STAFF**

Sl. No	Name of the Doctor	Qualification	Reg. No.
1	Dr. DEVI , P	M.B.B.S., DNB (O & G)	TNMC - 88501
2	Dr. M. VELVEENA	B.Sc. Nursing	JIPMER Reg.No. - 111823075

2. This registration is granted subject to the aforesaid Act and Rules there under and any contravention thereof 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 : **PY/AC/2023/14624/L1/PUDUCHERRY/11**

**Dr. G. SRIRAMULU**  
**APPROPRIATE AUTHORITY (ART) -CUM-**  
**DIRECTOR OF HEALTH & FAMILY WELFARE SERVICES**  
**PUDUCHERRY**

Date:

