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/059

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: 04/11/2023 Ending on Dt: 03/11/2028

(a) Name And Address of the ART Clinic:- Maitri Diagnostic Centre

Block.16-Maitri Society, District-Ahmedabad

Pin Code-380015

Sr. No	Name of the Post	Name of the staff	Qualification	Registration No.
1	Pathologist	Dr Parul Mehta	M.D.DCP (Path)	M.B.B.S :- G-3441
2	Gynecologist	Dr Harshad Shah	M.D.Gynec	G-4542
3	Centre Manager	Ms. Rachana Korat	MSc PGMLT & PGDHM	PGMLT:-March- 2011/GS-AB-30 MSc:-13A5920956

(b) Type of Institution (Government or Private) and:- Private

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

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The ART bank	named below for purposes	of carrying out activities and procedures as per the
aforesaid Act	, for a period of	Ending on
		C
	finstitution (Govt. / Private)	
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- 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. District Registration No allotted:-

DISTRICT APPROPRIATE

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

District :- AHMEDABAD.

Date: - 04/11/2023.

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

*Strike out whichever is not applicable or necessary.

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