

## Commissionerate

## State Appropriate Authority, ART and Surrogacy Act

Health and Family Welfare Services
Arogya Soudha, 1st Cross, Magadi Road,
Bangalore-560023
Form 4

## CERTIFICATE OF REGISTRATION

## SURROGACY CLINIC

Certificate No: KA/SC/2023/10079/SC/Bengaluru Urban /150

- Authority, Commissioner, Health and Family Welfare Services, Bengaluru hereby grants registration to the Surrogacy In exercise of the powers conferred under section 12 (1) of the Surrogacy (Regulation) Act, 2021 (47 of 2021), the Appropriate below for purposes of carrying out surrogacy or surrogacy procedures as per the aforesaid Act, for a period of Three years i.e. from 01-08-2023 to 31-07-2026. Clinic named
- (a) Name and address of the Surrogacy clin ic: MANNAT FERTILITY CLINIC

No. 90/2, 2<sup>nd</sup> Floor, Krishna Icon, Outer Ring Road, Marathahalli, Bangalore – 560037.

(b) Type of institution (Government / Private): Private

2. suspension or cancellation of this certificate of registration before the expiry of the said period of three years. This registration is granted subject to the aforesaid Act and Rules there under and any contravention thereof shall result ij

3. Registration No. allotted: KA/SC/2022/10079/SC/Bengaluru Urban /150

Chairman

State Appropriate Authority

State: KARNATAKA

Date: 01-08-2023

Commissioner
State Appropriate Authority
ART & Surrogacy Act
Directorate of Health & Family Welfare Services
"Arogya Soudha", Bengaluru -560 023.