

Form 4

CERTIFICATE OF REGISTRATION
Surrogacy Clinic
(To be issued in duplicate)

Certificate
ACPN/1105/MOH/21.01.2023

Exercise of the powers conferred under section 12 (1) of the Surrogacy (Regulation) Act, 2021 [47 (1)] the Appropriate Authority MEDICAL OFFICER OF HEALTH, P/NORTH WARD hereby grants registration to the Surrogacy Clinic named below for purposes of carrying out surrogacy or surrogacy procedures as per the aforesaid Act, for a period of 3 years ending on 15/01/2026.

Name and address of the Surrogacy clinic: AARUSH IVF & ENDOSCOPY CENTRE, MALAD WEST

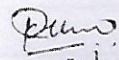
Type of institution (Government / Private): PRIVATE

Registration is granted subject to the aforesaid Act and Rules there under and

any violation thereof shall result in suspension or cancellation of this certificate of registration during the expiry of the said period of three years.

Registration No allotted - PN/2023/SR-0002

Renewed Certificate of Registration only: Period of validity of earlier Certificate of Registration
16/01/2023 TO 15/01/2026


21/01/2023
Medical Officer of Health
P/North Ward

Date: 21.01.2023
Place: Malad West

Display One Copy of This Certificate at a conspicuous place at the place of business

Print out whichever is not applicable or necessary

*received two original copies of
Surrogacy registration certificate
23/1/2023 Jum kareel
Key No 88191*