FORM 4

CERTIFICATE OF REGISTRATION

Surrogacy Clinic (To be issued in duplicate)

Certificate No.: 01/ 21/09/2023

 In exercise of the powers conferred under Section 12 (1) of the Surrogacy (Regulation) Act, 2021 (47 of 2021), the <u>District Appropriate Authority</u> <u>and Chief District Health Officer, Banaskantha</u> 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 three years ending on 20/09/2026

a) Name of Applicant :	Dr. P. G. Patel
b) Name and address of the Surrogacy Clinic:	ART Clinic, Meeta Hospital, 2 nd Floor Nr. Tirupati Plaza Opp. Govt. Residency, Vikaspath, College Road, Palanpur
c) Type of institution : (Government/ Private)	Private

- 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 three years.
- 3. District Registration No. allotted : 01 / 21/09/2023
- For renewed Certificate of Registration only: Period of validity of earlier
 Certificate of Registration from ______ to _____

Date: 21/09/2023 Place: Palanpur Appropriate Authority (Surrogacy Act,2021) and Chief District Health Officer, D.P.B.K., Palanpur

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

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