

**FORM 4**  
**( See Rule 11)**  
**Certificate of Registration**  
**Surrogacy Clinice**  
**(To be Issued In duplicate)**

D.N.-3991  
17/05/23


Certificat No- MP/NARMADAPURAM/Surrogacy Clinice /No-01

1- In Exerercise of the powers conforred under section 12 (1) of the Surrogacy (Regulation) Act-2021 ( 47 of 2021) the Appropriate Authority Chairperson, District Appropriate Authorty for ART and Surrogacy. hereby grants registration to the Surrogncy Clinice named below for purposes of carrying out surrogacy or surrogacy procedures as per the aforesaid Act, for a period of -Five years ending on 15-05-2028.

(a) Name and address of the Surrogacy Clinic- ANADI-IVF TEST TUBE BABY  
CENTRE A UNIT OF NEW  
PANDEY HOSPITAL SHANICHARA  
NARMADAPURAM- 461001

(b) Type of institution (Government of Private)- Private

- 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 three years.
- 3- Registration No Allotted. MP/NARMADAPURAM/ Surrogacy Clinice /No-01
- 4- For renewed Certificate of Resitration only : period of validity of earlier Certificate of Registration form,16-05-2023 To 15-05-2028

  
Chairperson,  
District Appropriate Authority for ART  
and Surrogacy.  
District Narmadapuram

Date-16-05-2023  
Place—NARMADAPURAM

received

Spandey

