



FORM 4

[See rule 11]

Certificate of Registration

Surrogacy Clinic

(To be issued in duplicate)

Certificate no. : AP/SC/2023/10933/SC/TIRUPATI/183

1. In exercise of the powers conferred under Section 12 (l) of the Surrogacy (Regulation) Act, 2021(47 of 2021), the Appropriate Authority.....
..... Here by grants registration to the Surrogacy Clinic named below for purposes of carrying out Surrogacy or Surrogacy procedures as per as per the aforesaid Act, for a period of **03.11.2023** years ending on **02.11.2026**
(a) Name and address of the Surrogacy Clinic : **9 FERTILITY CENTER,**
1st Floor Aster Narayanadri Hospital Door.No:9-100/1, Reniguntha Road, Tirupati, Tirupati District.
(b) Type of institution (Govt. or 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 AP/SC/2023/10933/SC/TIRUPATI/183
4. For renewed Certificate of Registration only : Period of validity of earlier Certificate of Registration from NIL to NIL

Signature, Name and Designation of
the Appropriate Authority
SEAL District Medical & Health Officer,
Vice-Chairman, ART & Surrogacy Act-2021
Tirupathi District.

Date: 22/11/23

Place: Tirupati

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

***Strick out whichever is not applicable or necessary**