FORM 3 [See rule 8]

Certificate Of Registration

ART clinic (Level 1/Level 2)/ART bank

(To be issued in duplicate)

Certificate No.:TS/AC/L1/013

- 1. In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority <u>Telangana State</u> hereby grants registration to the ART Clinic named below for purposes of carrying out Assisted Reproductive Technology procedures as per the aforesaid Act, for a period of <u>22.12.2022</u> ending on <u>21 42.2027</u>
- (a) Name and address of the ART Clinic; INDIRA IVF CLINIC

 (A UNIT OF INDIRA IVF HOSPITAL PVT. LTD.)

 FIRST FLOOR, BHUVANA TOWERS, 101, SAROJINI DEVI ROAD, SECUNDERABAD,

S.No. Name of the Post Name of the Staff Qualification Registration No (if applicable)

S.No.	Name of the Post	Name of the Staff	Qualification	Registration No (if applicable)
1	Director & Gynaeclogist	Dr Swathi Mothe	MS OBGYN , Reproductive Medicine Training	63429

- (b) Type of institution (Government or Private) and; Private
- (c) Type of facility: Level 1

OR

The ART Bank named below for purposes of carrying out activities and procedures as per the aforesaid Act, for a period of ending on

- (a) Name and address of the ART Bank;
- (b) Type of institution (Govt. / 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 five years.
- 3. Registration No. allotted: TS/AC/L2/013

Signature, Name and Designation

Chair Person & State Appropriate Authority

Assisted Reproductive Technology (Regulation) Ad

of the Appropriate Authority

Date: 22 .12.2022

Place: Hyderabad

Surrogacy (Regulation) Act, Telangana State

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

* Strike out whichever is not applicable or necessary