FORM 3 [See Rule 8]

CERTIFICATE OF REGISTRATION

ART CLINIC (LEVEL 1 / LEVEL 2) / ART BANK

(To be issued in duplicate)

Phone: 0471-2517392, 2327994

		Cernficate No: 1.37-1221993.			
1.	In exercise of the powers conferred under Section 16(
	Technology (Regulation) Act, 2021, the Appropriate Authority GONERNMENT OF KERALA hereby grants registration of the ART Clinic named below for purpose of carrying out Assisted Reproductive Technology procedure as per the aforesaid Act, for a period of				
					IR MATERNITY AND
				b) Type of Institution (Government or Private) and	
	c) Type of facility: Lvel 1 or Level 2				
	OR				
	The ART Bank named below for purposes of carrying out activities and procedures as per the aforesaid Act, for a period of				
				b) Type of Institution (Government or Private):	
	2)	This registration is granted subject to the aforesaid Act and Rules there under and any			
30	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 AR1 L 1 1005				
4)	For renewed Certificate of Registration only:				
	Period of validity of earlier Certificate of Registration from to				
1/38	HORITYFOR	N 4			
3%		Tailor 1 as			
3("	Manual of S	85/ 1			
15	Signat	ure, Name and Designation of			
6	* 1200	the Appropriate Authority			
Date	e 25/1/2023 CHAIR PERSON	Joint Secretary SEAL Health & FW Department Type M. Kerala			
	CHAIR FEROOR	Govt. Secretariat. 197			

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

Plae : TRIVANDRUM APPROPRIATE AUTHORITY FOR