

PUNE MUNICIPAL CORPORATION

DEPARTMENT OF HEALTH

THE SURROGACY (REGULATION) ACT, 2021 FORM 4 [See rule 11]

CERTIFICATE OF REGISTRATION

Surrogacy Clinic

(To be issued in duplicate)

Certificate No.: 16 2022

	Certificate No7
In e	xercise of the powers conferred under section 12 (1) of the Surrogacy (Regulation) Act, 2021
(47	of 2021), the Appropriate Authority, Assistant Medical Officer of Health, PMC hereby grants
regi	stration to the Surrogacy Clinic named below for purposes of carrying out surrogacy or
surr	Name of Applicant: Dr. Parks Bhaskar Rote.
	Name and address of the Surrogacy clinic: Elpris IVF and Maternity Home.
	Flat no 384. Ist floor, flat NOGAT, 200 floor, Panchratna Apt.
1	Plat no. 1 S.No. 149/14, ITI ROW, Parihar chowk, Aunah, Punc 411
(b)	Type of institution (Government / Private)
, ,	Type of institution (Government / Private) Private s registration is, granted subject to the aforesaid Act and Rules there under and any
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This	s registration is. granted subject to the aforesaid Act and Rules there under and any
This con	s registration is, granted subject to the aforesaid Act and Rules there under and any travention thereof shall result in suspension or cancellation of this certificate of registration
This con	s registration is, granted subject to the aforesaid Act and Rules there under and any travention thereof shall result in suspension or cancellation of this certificate of registration ore the expiry of the said period of three years.

Date: 20/10/2022

Place: fune

DETEMEPANAS BARTHANTON OF ASSISTANT MEDICAL OFFICER OF FILE AUTHORITY SURROGACY ACT. 2021

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

*Strike out whichever is not applicable or necessary