

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 : 12 20 22

	In exercise 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
	registration to the Surrogacy Clinic named below for purposes of carrying out surrogacy or
	surrogacy procedures as per the aforesaid Act, for a period of three years ending on
	(a) Name and address of the Surrogacy clinic: Gynneworld Hospital.
	2nd floor, S. No. 1066 A, Gokhale Rd, Model colony, Om Super Market
	chark Shivajinagar, Pune 411016
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2.	(b) Type of institution (Government / Private)
2.	(b) Type of institution (Government / Private) This registration is. granted subject to the aforesaid Act and Rules there under and any
2.	(b) Type of institution (Government / Private) This registration is granted subject to the aforesaid Act and Rules there under and any contravention thereof shall result in suspension or cancellation of this certificate of registration
	(b) Type of institution (Government / Private) This registration is granted subject to the aforesaid Act and Rules there under and any contravention thereof shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of three years.

Date: 20 10 2022

Place: PUNE



(br. Kalpana Baliwant)
Signature, Name and Designation of ASSISTANT Mithe Appropriate Authority

Display one copy of this certificate at a conspicuous place at the place of business *Strike out whichever is not applicable or necessary