

## 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.: 07/2022

1.	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 on19:10:20 25
	Name of Applicant: Dr. Anil Nanjundappa Chittake.
	(a) Name and address of the Surrogacy clinic: "Embrio' IVF Centre.
	S.No. 112/1/2/1, showrom no. 101, Pride Gateway 1st flow, above
	croma showrom, Opp. D Mart, Baner, Pune 411045
	(b) Type of institution (Government / Private) Private
2.	This registration is. granted subject to the aforesaid Act and Rules there under and any
Ŧ	contravention thereof 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 <u>67   2622</u>
4.	(For renewed Certificate of Registration only): Period of validity of earlier Certificate of
	Registration fromToTo
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Date: 20.10.2022

Place: Pune

Signature, ASSISTAN HEALTI AUTHORIT

Signature, Name and Designation of ASSISTANT the Appropriate Authority HEALTH AND APPROPRIATE 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