



સરકાર ગુજરાત  
Government of Gujarat

# FORM -3

[See rule 8]

## Certificate Of Registration ART clinic (Level 1/ Level 2) ART bank (To be issued in duplicate)

**Certificate No:-GJ/GHSNR/ART-C/2023/002**

1. In exercise of the power conferred under Section 16(1) of the Assisted Reproductive Technology(Regulation) ACT,2021 the District Appropriate Authority and **CDMO Surendranagar** hereby grants registration to the ART Clinic named below aforesaid Act,for a period of 5 (five years)ending on **20/07/2028**

(a) Name and address of the ART Clinic:- **MURLI IVF CENTER, SURENDRANAGAR**

| Sr.No | Name of the Post | Name of the Staff   | Qualification               | Registration No |
|-------|------------------|---------------------|-----------------------------|-----------------|
| 1     | Gynecologist     | Dr.Alpesh Gohil     | M.B DGO                     | G-15958         |
| 2     | Embryologist     | Anil Gadhiya        |                             | N/A             |
| 3     | Andrologist      | Dr.Vikash Bathla    | M.S (General Surgery)       | G-30260         |
| 4     | Anaesthetist     | Dr.Niraj Solanki    | MD (Anaesthesia)            | G-23456         |
| 5     | Counsellor       | Nilofar R Chauhan   | B.A.MA (Hindi)              | N/A             |
| 6     | Staff Nurse      | Vimalben jadvav     | GNM Nursing                 | A-I/H-I-37363   |
| 7     | Lab.Tech         | Rajendra M Pancholl | MSc. (Medical Microbiology) | N/A             |

(b) Type of institution (Government or Private)-**Private**

(c)Type of facility- **Level 2**

OR

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

Name and address of the ART Bank:-.....

(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 Rule there under and any contravention ther of shall result in suspension or cancellation of this certificate of registration before the expiry of the said period of five years.

3. District Registration No allotted: **GJ/GHSNR/ART-C/2023/002**

4. For renewed Certificate of Registration only :-.....

Period of validity of earlier Cetificate of Registration from.....to.....

*M. M. M. M.*  
DISTRICT APPROPRIATE  
AUTHORITY  
ART(REGULATION)ACT,2021

Distt:Surendranagar

Date:20/07/2023

*P. G. S.*

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

\*Strike out whichever is not applicable or necessary