



FORM 4  
(See Rule 11)

## CERTIFICATE OF REGISTRATION SURROGACY CLINIC

(To be Issued in Duplicate)

URN No. : MH/SC/2025/11087  
/SC/Beed/89

1. In Exercise of the powers conferred under section 12 (1) of the Surrogacy (Regulation) Act, 2021 (47 of 2021), the Appropriate Authority District Civil Surgeon, Beed. 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 03 Years ending on 2028

(a) Name and address of the Surrogacy Clinic Aai IVF  
Aai Hospital, Jalna Road, Behind Mantu Bank, Beed

(b) Type of institution (Government / Private)  private

2. This registration is granted subject to the aforesaid Act and Rules there under and any Contravention there of 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 02

4. For renewed Certificate of Registration only Period of validity of earlier Certificate of Registration From 21/05/2025 To 20/05/2028

Date : 21 / 05 / 2025

Place : BEED



**District Civil Surgeon**

District Appropriate Authority ART  
and Surrogacy Beed  
Dist. Hospital, Beed

Display One Copy of This Certificate at a conspicuous Place at the Place of Business

\* Strike out whichever is not applicable or necessary