



Certificate of Registration

ART Clinic (Level 1/Level 2) ART Bank

1. In exercise of the powers conferred under Section 16(1) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate

Authority By Medical Officer Health NME NAGPUR
hereby grants registration to the ART Clinic named below for purposes of carrying out Assisted Reproductive Technology
procedures as per the aforesaid Act, for a period of _____ ending on _____

(a) Name and address of the ART Clinic :- _____

(b) Type of institution :- Government or Private

(c) Type of facility :- Level 1 or Level 2.

OR

The ART Bank named below for purposes of carrying out activities and procedures as per the aforesaid Act, for a period of 5 year ending
on 22.03.2023

(a) Name and address of the ART Bank :- Mayyari Ivf and Fertility Centre, 134 Hill road, next to Maruti Suzuki workshop gndw:nagar Nagpur.

(b) Type of institution :- Government or Private

2. 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 five years.

3. Registration No. allotted -- URN No. MH/AB/2025/11640/NAGPUR/143

4. For renewed Certificate of Registration only:

Period of validity of earlier Certificate of Registration from 23.03.2026 to 22.03.2031

Date:-

Place:- 9/4/2026 NAGPUR

Display one copy of this certificate at a conspicuous place at the place of Clinic /ART Bank

Dr. D.S. Selokar

Signature, Name and Designation
of the Appropriate Authority

Medical Officer Health
Nagpur Mpt. Corpor.