



GOVT. OF MAHARASHTRA



FORM 4
CERTIFICATE OF REGISTRATION
Surrogacy Clinic
(To be issued in duplicate)

Certificate No.: MH/SC/2023
10849/SC/NAGPUR/53


1. In exercise of the powers conferred under section 12 (1) of the Surrogacy (Regulation) Act, 2021 (47 of 2021), the Appropriate Authority HEALTH OFFICER NMC NAGPUR 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 3 years ending on 3/8/26

(a) Name and address of the Surrogacy clinic: KIMS - KINGSWAY HOSPITAL
44, Near Kasturba Road, Kingsway Road
NAGPUR
(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 MH/SC/2023/10849/SC/NAGPUR/53

4. For renewed Certificate of Registration only : Period of validity of earlier Certificate of Registration from 4/8/23 To 3/8/26


Signature, Name and Designation of
the Appropriate Authority

Medical Officer Health
Nagpur Mpl. Corporation

SEAL

Date : 4/8/23

Place : NAGPUR

SEAL

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

*Strike out whichever is not applicable or necessary

