



Certificate of Registration

Surrogacy Clinic

1. In exercise of the powers conferred under Section 12(1) of the Surrogacy (Regulation) Act, 2021 (47 of 2021), the Appropriate Authority of MAHARASHTRA 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 years ending on 02/03/2028

(a) Name and address of the Surrogacy Clinic: - MALTE INF FERTILITY CENTRE, SHOP NO.

514 TO 516 5TH FLOOR, ROOM 9A Beldivisa Apt., Govind Nagar Nashik.

(b) Type of institution: - Government or Private - 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 three years.

3. Registration No. allotted - URN No. MA13C12024/1102013C/Nashik/84

4. For renewed Certificate of Registration only: Period of validity of earlier Certificate of Registration from 03/03/2025 to 02/03/2028

Date:- 22/3/25
Place:- NASHIK

Received
gms



Govind
No. _____
Medical Officer of Health
Appropriate Authority ART and Surrogacy
Public Health Department,
Nashik Municipal Corporation Nashik

Display one copy of this certificate at a conspicuous place at the place of Surrogacy Clinic