



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 OF MAHARASHTRA 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 years ending on 19/05/2030

- (a) Name and address of the ART Bank :- CHAITANYA NURSING HOME SWASTI IVE AND FERTILITY CENTRE
- (b) Type of institution :- Government or Private - PRIVATE Charpote Ghat, Ashokstambha, Nashik.

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/2024/11378/Nashik/118

4. For renewed Certificate of Registration only:
Period of validity of earlier Certificate of Registration from 20/05/2025 to 19/05/2030

Date:- 30/7/2025

Place:- Nashik

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



M. Venkar
 Medical Officer of Health
 Nashik Municipal Corporation, Nashik
 Medical Officer of Health
 Appropriate Authority ART and Surrogacy
 Public Health Department,
 Nashik Municipal Corporation Nashik