



PIMPRI CHINCHWAD MUNICIPAL CORPORATION
Medical Department

ART Clinic (Level 1/Level 2) / ART Bank

Form -3 (Rule 8)

Certificate of Registration

Certificate No.: 10

1. In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority Pimpri Chinchwad Municipal Corporation, Pimpri - 411018 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 FIVE ending on 02-03-2030

- (a) Name and address of the ART Clinic; DPU IVF & ENDOSCOPY CENTER,
DR. D.Y. PATIL HOSPITAL & RESEARCH CENTER, SANT TUKARAN NAGAR
PIMPRI 411018
- (b) Type of Institution (Government or Private) and PRIVATE
- (c) Type of facility: ~~Level-1~~ or Level 2. 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 _____ ending on _____

- (a) Name and address of the ART Bank; _____
- _____
- _____
- (b) Type of Institution (Govt. / 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 five years.

3. Registration No. allotted MH/AC/2022/11123/L2/PUNE/119

4. For renewed Certificate of Registration only: _____

Period of validity of earlier Certificate of Registration from _____ to _____

Date: 3-03-2025

Place: PIMPRI



(Dr. Laxman P. Gophabe)
 Medical Officer Of Health
 The Appropriate Authority

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