

**FORM 3**  
[See rule 8]  
**Certificate of Registration**  
**ART CLINIC (LEVEL1/LEVEL2)**  
**(To be issued in duplicate)**

**ECF No.-788239/42**

**Certificate No.AS/ 43**

1. In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority, Assam under the ART & Surrogacy Act, hereby grants registration to the ART Clinic named below for purposes of carrying out Assisted Reproductive Technology procedures as per the aforesaid Act, for the **period of Five (5) years from the date of issue of this certificate.**

- (a) Name and address of the ART Clinic: **AVANEESH HOSPITAL & RESEARCH CENTRE**  
Nakari, Ward No.2, Lakhimpur, Assam
- (b) Type of institution: Private
- (c) Type of facility: Level 2

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. **AS/ART Clinic/Pvt./21/2026**

**(Dr. Pranati Gogoi, ACS)**  
**Addl. Secretary to the Govt. of Assam cum**  
**Chairperson, Appropriate Authority**  
**ART & Surrogacy Act, Assam**  
**Health & Family Welfare Department**  
**Dispur, Guwahati-06.**

Place: Guwahati

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