



FORM 3

[See rule 8 ]

**Certificate of Registration**

ART clinic (Level 1/Level 2) ART bank

(To be issued in duplicate)

AP/AC/2022/L2/PRAKASAM/08  
Certificate no. : .....

1. In exercise of the powers conferred under Section 16 (I) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority hereby grants registration to the ART Clinic named below for purposes of carrying on: Assisted Reproductive Technology procedures as per the aforesaid Act, for a period of FIVE YEARS FROM 12-12-2022 ending on 11-12-2027..

- (a) Name and address of the ART Clinic : KOMALI FERTILITY CENTRE  
NH5, SOUTH BYPASS ROAD, NEAR NELLORE BUS  
STAND
- (b) Type of institution (Govt. or Private): PRIVATE
- (c) Type of facility (Level 1 or Level 2) : LEVEL - 02 ONGOLE

OR

The ART Bank named below for purposes of carrying out activities and procedures as per the aforesaid Act for a period of NILL ending on NILL..

- (a) Name and address of the ART Bank: NOT APPLICABLE  
NOT APPLICABLE
- (b) Type of institution (Govt. / Private): NOT APPLICABLE

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: AP/AC/2022/L2/PRAKASAM/08

4. Period of validity of earlier Certificate of Registration (for renewed Certificate of Registration only ) from NILL to NILL.....

  
Signature, Name and Designation of

the Appropriate Authority  
**VICE CHAIRMAN**  
SEAL District Appropriate Authority &  
District Medical & Health Officer  
Surrogacy & ART Act 2021  
Ongole, Prakasam District.

Date: 30-06-2023

Place: ONGOLE

**Display one copy of this certificate at a conspicuous place at the place of business**  
**\*Strick out whichever is not applicable or necessary**