Reg. No ART/ERD/001/2026

Serial No 911

Certificate No. 001/911

GOVERNMENT OF TAMILNADU

FORM - 3

(See rule 8)

CERTIFICATE OF REGISTRATION
ART Clinic - Level - I

1. In exercise of the powers conferred under Section 16(1) of the Assisted Reproductive Technology (Regulation) Act, 2021 the District Appropriate Authority, District is 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 5 years ending on 18.06.2031

   (a) Name and address of the ART Clinic : Rhea healthcare Private limited
   55/4, 3rd floor, VSG building
   Bhavani main road, Ashokapuram
   Veerappanchathram,
   Erode - 638004.

   (b) Type of institution : Private

   (c) Type of Facility: Level -I

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 th expiry of the said period of five years.
3. Registration No. allotted ART/ERD/001/2026
4. For renewed Certificate of Registration only;
   Period of validity of earlier Certificate of Registration from 19.06.2026 to 18.06.2031

DISTRICT APPROPRIATE AUTHORITY • ERODE DISTRICT • ART ACT 2021 Seal THE SURROGACY ACT 2021

19/6/26

District Appropriate Authority,
The Assisted Reproductive Technology (Regulation) Act, 2021 &
The Surrogacy (Regulation) Act, 2021
District

Date : 19/06/2026

DISPLAY ONE COPY OF THIS CERTIFICATE AT CONSPICUOUS PLACE AT THE PLACE OF BUSINESS

e-Receipt for State Bank Collect Payment

DMRHS Chennai

DIR. OF MED AND RUR HEALTH SERVICES ART

259-261 ANNA SALAI TEYNAMPET CHENNAI , CHENNAI , Chennai-600006
Date: 20-Feb-2024

SBCollect Reference Number :	DUM2742524
Category :	ART CLINIC LEVEL 1 Rs.50000/-
Amount :	₹50000
NAME OF ART HOSPITAL / NURSING HOME/ CLINIC :	RHEA HEALTHCARE PRIVATE LIMITED
CONTACT PERSON NAME :	J VIGNESH
ADDRESS OF ART HOSPITAL/NURSIN :	55 VSG BUILDING BHAVANI MAIN ROAD VEERAPPANCHATHRAM ERODE 638 004
EMAIL ID :	customercare.erode@novalvffertility.com
MOBILE NUMBER :	09345316910
Amount to be Paid :	50000
Transaction charge :	590.00
Total Amount (In Figures) :	50,590.00
Total Amount (In words) :	Rupees Fifty Thousand Five Hundred Ninety Only
Remarks :	
Notification 1:	Contact JAO Mr.Kamalakannan Mobile 9444161736 Dr.Viswanathan JD 9443968192
Notification 2:	For tech support Please call SBI 9003094709

I. VIGNESH-OPERATIONAL MANAGER
RHEA HEALTHCARE PRIVATE LIMITED,
55/4, 3rd Floor, VSG Building,
Bhavani Main Rd, Ashokapuram,
Veerappanchathram, Erode-638 004.