

FORM 3
(see rule 8)
Certificate of Registration
ART Clinic (Level 1/Level 2)/ ART Bank
(To be Issued in duplicate)

Certificate No: **MP/UJJAIN/ART Level-1 Clinic/2025/ 14**

1. In exercise of the powers conferred under Section 16 (1) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate Authority **COLLECTOR AND DISTRICT MAGISTRATE** hereby grants registration to the ART Clinic named below for purposes of carrying out Assisted Reproductive Technology procedure as per the aforesaid Act for a period of **FIVE YEAR** ending on **18/01/2031**

(a) Name and address the ART Clinic **Nova IVF Fertility – a Unit of Rhea Healthcare Pvt. Ltd, 27 Amar Singh Road Ladda Dreams 1st Floor above Union Bank Freeganj Ujjain**

(b) Type of institution (Government or Private) and **PRIVATE**

(c) Type of facility : Level 1 or Level 2 **LEVEL 1**
or

The ART Bank named below for purpose of carrying out activities and procedures as per the aforesaid Act for FIVE YEAR ending of **NA**

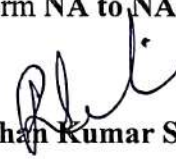
(a) Name and address of the Bank **NOT APPLICABLE**

(b) Type of institution (Govt/Private) **NOT APPLICABLE**

2. This registration granted subject to aforesaid Act and Rules there under and any contravention 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: **MP/UJJAIN/ART Level-1 Clinic/2025/ 14**

4. For renewal Certificate of Registration only : **NOT APPLICABLE**
Period of validity of earlier Certificate of Registration form **NA to NA**


(Raushan Kumar Singh) IAS
District Magistrate & Appropriate Authority
ART Act 2021 & The Surrogacy Act 2021

Date **19/01/2026**

Place- **UJJAIN**

Display one copy of this Certificate at a conspicuous place of business

*Strike out copy whichever is not applicable or necessary