



(Form 3 (See rule 8))

Certificate of Reg

ART Clinic (Level 1/ Level 2)

1. In exercise of the powers conferred under Section 16(1) of the Assisted Reproductive Technology (Regulation) Act, 2021, the Appropriate

Authority SMC, Solapur 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 27/08/2026 ending on 26/08/2031

- (a) Name and address of the ART Clinic :- SOLAPUR INFERTILITY CLINIC AND TEST TUBE BABY CENTRE, PVT. LTD, 52/2/4, Bhavani Peth, Rupa Bhavani Chowk, Solapur
- (b) Type of institution :- Government or Private
- (c) Type of facility :- Level 1 or 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 :- Government or Private
2. This registration is granted subject to the aforesaid Act and Rules there under and any contravention thereof 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 - URN No. TH|AC|2022|10849|12|Solapur|500
4. For renewed Certificate of Registration only:
Period of validity of earlier Certificate of Registration from 27/08/2026 to 26/08/2031

Date :- 27/08/2026

Place:- Solapur

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



Signature, Name and Designation of
the Appropriate Authority
Medical Officer of Health
Solapur Municipal Corporation Solapur