National ART & Surrogacy

FORM 3

[See rule 8]

Certificate of Registration

ART clinic (Level 1/Level 2) ART bank

(To be issued in duplicate)

Certificate No. : AP/AC/2026/18533/L2/PALNADU/395

1. In exercise of the powers conferred under Section 18 (l) 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 07-10-2026 ending on 06-10-2031.*

(a) Name and address of the ART Clinic: **DR CHENNA REDDY HOSPITALS DO.NO.17-10-31, Christan Palem, Narasarao Peta,Palnadu District-522601**

(a) Type of institution (Govt. or Private): ***Private***

(b) Type of facility (Level 1 or Level 2) : ***Level 2***

OR

The ART Bank named below for purposes of carrying out activities and pprocedures as per the aforesaid Act, for a period of Not Applicable ending on Not Applicable

(a) Name and address of the ART Bank: ***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/2026/18533/L2/PALNADU/395***

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

OFFICE OF THE DISTRICT MEDICAL & HEALTH OFFICER ART/SURROGACY ACT-2021 Date: 07-10-2026 Narasaraopet PALNADU DIST.

Signature, Name and Designation of the Appropriate Authority

SEAL Vice Chairman
DISTRICT APPROPRIATE AUTHORITY AND
DISTRICT MEDICAL & HEALTHE OFFICER
For ART/SURROGACY ACT-2021
PALNADU DISTRICT.

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

*Strick out whichever is not applicable or necessary