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U 11019/ 52/2023-HR
Government of India
Ministry of Health and Family Welfare
(Department of Health Research)

(सर्व स्वास्थ्य संन मर्ग)
प्रमुय वविव
स्वास्थ्य एव परिवार कल्याण विभाग
2nd Floor, IRCS Building,
New Delhi, the 17 March, 2023

To,

Principal Secretary (Health)/Secretary (Health)
[All States/UTs]

Subject. Instructions regarding registration number to be allocated in the registration certificates of the clinics/ banks by the State/ UT Appropriate Authority under the ART Act, 2021 and Surrogacy Act, 2021

Sir/Madam,

I am directed to draw attention to the above noted subject and to convey that the unique registration number may be issued by the State/ UT Appropriate Authority to the clinics/banks registered under ART Act and Surrogacy Act consisting of the following details:

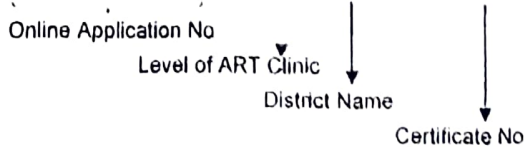
- i. Application number- which is generated by the National Registry Portal.
- ii. Type of facility-ART Bank (AB)/ Surrogacy clinic (SC)/ Level of the ART clinic (L1 or L2)
- iii. Name of the District where the clinic/bank is located.
- iv. Certificate number-The certificate no. will start from Sl. No.1 and continue in ascending order for the respective State/UT. The number should be in continuous serial order irrespective of the location, district, type of the clinic/ bank in the State/UT.

Illustrations

(i) ART Clinic (Level-1)

Registration number: Online Application No/L1/District Name/Certificate No

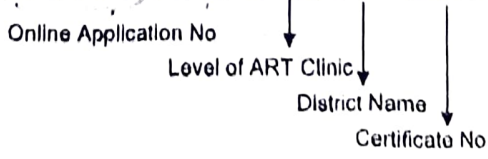
For example: for Delhi – DL/AC/2022/99999/L1/South Delhi/01



(ii) ART Clinic (Level-2)

Registration number: Online Application No/L2/District Name/Certificate No

For example: for Haryana – HR/AC/2022/99999/L,2/Faridabad/01



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(iii) **ART Bank**
Registration number: Online Application No/AB/District Name/Certificate No

For example: for West Bengal – WB/AB/2022/999999/AB/Maldas/01

Online Application No ART Bank District Name Certificate No

(iv) **Surrogacy Clinic**
Registration number: Online Application No/SC/District Name/Certificate No

For example: for Andhra Pradesh – AP/SC/2022/999999/SC/Kakinada/01

Online Application No Surrogacy Clinic District Name Certificate No

2. This issues with the approval of Competent Authority.

Yours sincerely,



(S.N. Jasra)
Director (Coordination)
Tel.:011-23736218

Copy to: All Nodal Officers – ART/Surrogacy (States/UTs)