

**FORM 17**  
**CERTIFICATE OF RENEWAL OF REGISTRATION**  
*(To be given by the appropriated authority on the letter head)*  
*[Refer rule 25(2)]*

This is with reference to the application dated.....from.....(Name of the hospital/tissue bank) for renewal of certificate of registration for performing organ(s)/tissue(s) retrieval/transplantation/banking under the Transplantation of Human Organs Act, 1994 (42 of 1994).

After having considered the facilities and standards of the above-said hospital/tissue bank, the Appropriate Authority hereby renews the certificate of registration of the said hospital/tissue bank for a period of five years.

This renewal is being given with the current facilities and staff shown in the present application form. Any reduction in the staff and/or facility must be brought to the notice of the undersigned.

Place.....  
Date.....

Signature of Appropriate Authority  
Seal.....