

INR 10 Stamp Paper

**Affidavit**

I, Dr....., D/o or S/o....., aged – .....years, resident of .....  
DMC / MCI / State registration number ....., do hereby give an undertaking under oath:

1. That I will perform ultrasound at Apollo Centre for Fetal medicine, Indraprastha Apollo Hospital, New Delhi on 17th May 2019 for the purpose of practical examination and is registered with Appropriate Authority vide Registration no. 441
2. That I will comply with the provision made under the PNDT Act 1994 and Rules 1996 and maintain necessary records/ document as per the provision made under the PNDT Act 1994 and Rules 1996.
3. That I shall not conduct any test or procedure, by whatever name called, for selection of sex before or after conception or for detection of sex of foetus except for disease specified in sec 4(2) nor shall the sex of the foetus be disclosed to anybody; and
4. That the ultrasound clinic/ imaging centre of Apollo Centre for Fetal medicine, Indraprastha Apollo Hospital, New Delhi, shall display prominently a notice that they don't conduct any technique, test or procedure etc. by whatever name called, for detection of sex of foetus or for selection of sex before or after conception.
5. That there is no court case pending against me.

**DEPONENT**

**VERIFICATION**

I, the above named deponent do hereby solemnly affirm and declare that all the contents in this affidavit are true and correct to the best of my knowledge and belief and nothing has been concealed therefrom.

**DEPONENT**