**………………………………………………..**

**……………………………………………………………………………**

**Please quote the below mentioned reference number in all the documents**

**PHSRC / …........... /……………………**

**……………………………………………………………………………**

**……………………………………………………………………………**

**……………………………………………………………………………**

**Registration of Private Medical Institutions with the**

**Private Health Services Regulatory Council Under the**

**Private Medical Institutions Act No: 21 of 2006**

**In order to process the new registration / renewal of registration of your Private Medical Institution with the Private Health Services Regulatory Council, please provide the following documents which are marked in red at your earliest.**

**Renewal of registration with the Sri Lanka Medical Council of the Medical Director/Medical Officer**

**(Certificate renewed after year 2020)**

**Copy of the certificate issued from the Atomic Energy Authority**

**(Current year certificate is compulsory)**

**Method of waste management system**

**Copy of the certificate of the Medical Laboratory Technician (MLT)**

**(Certificate issued by Director General of Health Services or Sri Lanka Medical Council)**

**Stamp duty payment**

**Registration certificate of the Nursing In charge with SLMC/SLNC/PHSRC Listed**

**Other …………………………………………………………………………………………………………**

**………………………………………………………………………………………………………………**

**………………………………………………………………………………………………………………**

* **Please Note that, all the copies of certificates should be certified by the Management.**

**Thank You.**

**Dr. Dammika Alahapperuma**

**Secretary**

**Private Health Services Regulatory Council**