CHALLAN
MTR Form Number-6

GRN	MH012266028202627E	**BARCODE**		**Date**	17/10/2026-19:31:06	**Form ID**	6(1)

Department	Inspector General Of Registration	**Payer Details**	
Type of Payment	Stamp Duty and Registration Fee together Registration Fee	**TAX ID / TAN (If Any)**	
		PAN No.(If Applicable)	AFZXXXXXXG
Office Name	NGP4_JT NAGPUR NO 4 SUB REGISTRAR	**Full Name**	HEMANT P TALWEKAR
Location	NAGPUR		
Year	2026-2027 One Time	**Flat/Block No.**	PLOT NO 37 IN SARASWATI NAGARI 11
		Premises/Building	KHASRA NO 25/1/A/1/2 PH NO 12-A MOUZA-LONARA TAH DIST NAGPUR
		Road/Street	NAGPUR
		Area/Locality	NAGPUR
		Town/City/District	
		PIN	4 4 1 1 1 1
		Remarks (If Any)	PAN2=AAACI6285N~SecondPartyName=ICICI HOME FINANCE COMPANY LIMITED~CA=2000000
		Amount In Words	Sixteen Thousand Twenty Rupees Only

Account Head Details	**Amount In Rs.**
0030046401 Stamp Duty	6010.00
0030063301 Registration Fee	10010.00
Total	16,020.00

Payment Details	PUNJAB NATIONAL BANK	**FOR USE IN RECEIVING BANK**			
Cheque-DD Details		Bank CIN	Ref. No.	03006172026101701413	5290950421
Cheque/DD No.		Bank Date	RBI Date	17/10/2026-19:33:01	Not Verified with RBI
Name of Bank		Bank-Branch		PUNJAB NATIONAL BANK	
Name of Branch		Scroll No. , Date		Not Verified with Scroll	

Department ID : Mobile No. : XXXXXX4740

NOTE:- This challan is valid for document to be registered in Sub Registrar office only. Not valid for unregistered document.

सदर चलन केवळ दुय्यम निबंधक कार्यालयात नोदंणी करावयाच्या दस्तांसाठी लागु आहे. नोदंणी न करावयाच्या दस्तांसाठी सदर चलन लागु नाही.

Print Date 17-10-2026 07:33:03