



CHALLAN
MTR Form Number-6



GRN	MH011023070202627E	BARCODE			Date	28/09/2026-20:50:54		Form ID	6(1)	
Department Inspector General Of Registration					Payer Details					
Stamp Duty and Registration Fee together					TAX ID / TAN (If Any)					
Type of Payment Registration Fee					PAN No.(If Applicable)		BCSXXXXXXE			
Office Name CSN2_JT SUB REGI CH _SAMBHAJINAGAR					Full Name		NITIN KAMLAKE KHOKLE			
Location CHHATRAPATI SAMBHAJINAGAR					Flat/Block No.		PLOT NO 25 GUT NO 244/PART SAI VIGHNESH			
Year 2026-2027 One Time					Premises/Building		PARK PHASE-1 NEAR HANUMAN MANDIR AT -			
Account Head Details					Amount In Rs.		APATGAON TAL AND DIST			
0030046401 Stamp Duty					2380.00		Road/Street		CHH SAMBHAJINAGAR (AURANGABAD)	
0030063301 Registration Fee					3960.00		Area/Locality		AURANGABAD	
							Town/City/District			
					PIN		4		3 1 0 0 1	
					Remarks (If Any)		PAN2=AAACI6285N~SecondPartyName=ICICI HOME FINANCE			
							COMPANY LIMITED~CA=790000			
					Amount In		Six Thousand Three Hundred Forty Rupees Only			
Total					6,340.00		Words			
Payment Details PUNJAB NATIONAL BANK					FOR USE IN RECEIVING BANK					
Cheque-DD Details					Bank CIN		Ref. No.		03006172026092900060 5286806834	
Cheque/DD No.					Bank Date		RBI Date		28/09/2026-20:51:40 Not Verified with RBI	
Name of Bank					Bank-Branch		PUNJAB NATIONAL BANK			
Name of Branch					Scroll No. , Date		Not Verified with Scroll			

Department ID : XXXXXX7919
NOTE:- This challan is valid for document to be registered in Sub Registrar office only. Not valid for unregistered document.
सदर चलन केवल दुय्यम निबंधक कार्यालयात नोंदणी करावयाच्या दस्तासाठी लागू आहे . नोंदणी न करावयाच्या दस्तासाठी सदर चलन लागू नाही .