



CHALLAN
MTR Form Number-6



GRN	MH010861800202627E	BARCODE			Date	25/09/2026-14:36:03		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)		AVYXXXXXXM						
Office Name CSN2_JT SUB REGI CH _SAMBHAJINAGAR					Full Name		VINOD MOHAN BAGADE						
Location CHHATRAPATI SAMBHAJINAGAR													
Year 2026-2027 One Time					Flat/Block No.		ROW HOUSE NO 01 PLOT NO 105 AND 106						
Account Head Details				Amount In Rs.	Premises/Building		PART GAT NO 181 NEAR MAHADEV MANDIR						
0030046401 Stamp Duty				11040.00	Road/Street		MAHALAXMI COLONY AT SATARA TAL CHH SAMBHAJINAGAR DIST CHH SAMBHAJINAGAR						
0030063301 Registration Fee				15000.00	Area/Locality		AURANGABAD CHH SAMBHAJINAGAR						
					Town/City/District								
					PIN			4	3	1	0	0	1
					Remarks (If Any)								
					PAN2=AAACI6285N~SecondPartyName=ICICI HOME FINANCE								
					COMPANY LTD~CA=3675237								
					Amount In		Twenty Six Thousand Forty Rupees Only						
Total				26,040.00	Words								
Payment Details PUNJAB NATIONAL BANK					FOR USE IN RECEIVING BANK								
Cheque-DD Details					Bank CIN	Ref. No.	03006172026092500725		5286254460				
Cheque/DD No.					Bank Date	RBI Date	25/09/2026-14:38:55		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. :

XXXXXX1567

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

सदर चलन केवल दुस्यम निबंधक कार्यालयात नोंदणी करावयाच्या दस्तांसाठी लागू आहे . नोंदणी न करावयाच्या दस्तांसाठी सदर चलन लागू नाही .