



CHALLAN
MTR Form Number-6



GRN	MH011076304202627E	BARCODE			Date	29/09/2026-15:51:55		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)		JZAXXXXXXN						
Office Name KGL_KAGAL SUB REGISTRAR					Full Name		SAHIL IMTIHAJ KOTHIWALE						
Location KOLHAPUR													
Year 2026-2027 One Time					Flat/Block No.		PLOT NO 80 RAMRAHIM PARK SURVEY NO						
Account Head Details				Amount In Rs.	Premises/Building		512/1/A/512/1/B AT KASABA KAGAL						
0030046401 Stamp Duty				12010.00	Road/Street		NEAR SAVJI HOTEL PUNE BENGALURE HIGHWAY TAL KAGAL DIST KOLHAPUR						
0030063301 Registration Fee				15000.00	Area/Locality		KOLHAPUR						
					Town/City/District								
					PIN			4	1	6	2	1	6
					Remarks (If Any)								
					PAN2=AADCH6010R~SecondPartyName=HINDUJA HOUSING FINANCE								
					LTD~CA=4000000								
					Amount In		Twenty Seven Thousand Ten Rupees Only						
Total				27,010.00	Words								
Payment Details PUNJAB NATIONAL BANK					FOR USE IN RECEIVING BANK								
Cheque-DD Details					Bank CIN	Ref. No.	03006172026092901057		5286929926				
Cheque/DD No.					Bank Date	RBI Date	29/09/2026-15:53:17		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. :

XXXXXX4567

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 .