CHALLAN
MTR Form Number-6

GRN	MH010854020202627E	**BARCODE**		**Date**	25/09/2026-13:11:48	**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)	AKHXXXXXXM
Office Name	KRV3_KARVEER NO 3 JT SUB REGISTRAR	**Full Name**	GANGARAM NAU BODAKE
Location	KOLHAPUR		
Year	2026-2027 One Time	**Flat/Block No.**	R S NO 1483 B 2 PART SHIVSHAKTI NAGAR AT
		Premises/Building	PHULEWADI RING ROAD
		Road/Street	A WARD KOLHAPUR TALUKA- KARVEER DIST-KOLHAPUR
		Area/Locality	KOLHAPUR
		Town/City/District	
		PIN	4 1 6 0 1 0
		Remarks (If Any)	PAN2=AAACI6285N~SecondPartyName=ICICI HOME FINANCE COMPANY LTD~CA=6754265
Total	35,270.00	**Amount In Words**	Thirty Five Thousand Two Hundred Seventy Rupees Only

Account Head Details	Amount In Rs.
0030046401 Stamp Duty	20270.00
0030063301 Registration Fee	15000.00

Payment Details	PUNJAB NATIONAL BANK	**FOR USE IN RECEIVING BANK**	
Cheque-DD Details		Bank CIN / Ref. No.	03006172026092500514 / 5286230915
Cheque/DD No.		Bank Date / RBI Date	25/09/2026-13:13:36 / 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. : XXXXXX6152

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 25-09-2026 01:13:37