



CHALLAN
MTR Form Number-6



GRN	MH003531049202627E	BARCODE			Date	31/05/2026-20:45:33		Form ID	6(1)	
Department Inspector General Of Registration					Payer Details					
Type of Payment Stamp Duty and Registration Fee together					TAX ID / TAN (If Any)					
					PAN No.(If Applicable)		BLZXXXXXXB			
Office Name ALR2_AHILYANAGAR 2 JT SUB REGISTRAR					Full Name		ROHOKALE KAVERI AMBADAS			
Location AHMEDNAGAR										
Year 2026-2027 One Time					Flat/Block No.		NORTH SIDE, PLOT NO 8/9/4, SR. NO. 23/4/23/6,			
					Premises/Building		KATORE NAGAR, NAGAPUR, NEAR			
Account Head Details					Amount In Rs.		RAGHVENDRA SWAMI TEMPLE			
0030046401 Stamp Duty					3596.00		Road/Street		NAGAPUR, AHMEDNAGAR, MAHARASHTRA	
0030063301 Registration Fee					5990.00		Area/Locality		AHMEDNAGAR	
							Town/City/District			
					PIN				4	1
							Remarks (If Any)			
							PAN2=AAACP3682N~SecondPartyName=PNB HOUSING FINANCE			
							LTD~CA=1197000			
							Amount In		Nine Thousand Five Hundred Eighty Six Rupees Only	
Total					9,586.00		Words			
Payment Details PUNJAB NATIONAL BANK					FOR USE IN RECEIVING BANK					
Cheque-DD Details					Bank CIN	Ref. No.	03006172026060100032		5264949667	
Cheque/DD No.					Bank Date	RBI Date	31/05/2026-20:47:07		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. :

XXXXXX1183

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.