CHALLAN
MTR Form Number-6

GRN	MH010662014202627E	BARCODE		Date	22/09/2026-19:53:49	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)	LWPXXXXXXQ
Office Name	RTN_HQR SUB REGISTRAR RATNAGIRI	**Full Name**	AMIT ANAND KANKANWADI
Location	RATNAGIRI		
Year	2026-2027 One Time	**Flat/Block No. Premises/Building**	PLOT NO 15 S NO 125/42 HOUSE NO 812 AT
Account Head Details	**Amount In Rs.**	**Road/Street**	MOUJE KHEDASHI TAL DIST RATNAGIRI
0030046401 Stamp Duty	5540.00	**Area/Locality Town/City/District**	RATNAGIRI
0030063301 Registration Fee	9230.00	PIN	4 1 5 6 3 9
		Remarks (If Any)	PAN2=AAACI6285N~SecondPartyName=ICICI HOME FINANCE COMPANY LIMITED~CA=1843378
Total	14,770.00	**Amount In Words**	Fourteen Thousand Seven Hundred Seventy Rupees Only

Payment Details	PUNJAB NATIONAL BANK	**FOR USE IN RECEIVING BANK**			
Cheque-DD Details		Bank CIN	Ref. No.	03006172026092201666	5285742056
Cheque/DD No.		Bank Date	RBI Date	22/09/2026-19:57:39	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. : XXXXXX6509

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.

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