CHALLAN

MTR Form Number-6

GRN	MH015435214202526E	**BARCODE**		**Date**	17/01/2026-16:04:14	**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)	
Office Name	YTM1_HQR SUB REGISTRAR YAVATMAT 1	**Full Name**	Shahebaz ahmad Khurshid Ali
Location	YAVATMAL		
Year	2025-2026 One Time	**Flat/Block No. Premises/Building**	PLOT NO. 34, SR NO. 47/2, MOUZA YAVATMAL
Account Head Details	**Amount In Rs.**		
0030063301 Registration Fee	5500.00	**Road/Street**	NEAR SHALIMAR PARK,
		Area/Locality Town/City/District	YAVATMAL
		PIN	4 4 5 0 0 1
		Remarks (If Any)	SecondPartyName=ICICI HOME FINANCE COMPANY LIMITED~CA=1100000
Total	5,500.00	**Amount In Words**	Five Thousand Five Hundred Rupees Only

Payment Details		**FOR USE IN RECEIVING BANK**			
Cheque-DD Details		Bank CIN	Ref. No.	69103332026011712735	767659165
Cheque/DD No.		Bank Date	RBI Date	17/01/2026-16:04:50	Not Verified with RBI
Name of Bank		Bank-Branch			
Name of Branch		Scroll No. , Date		Not Verified with Scroll	

Department ID : Mobile No. : XXXXXX0088

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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