



CHALLAN  
MTR Form Number-6



|                                                          |                    |         |  |               |                                            |                     |                                                    |         |      |                       |   |   |   |
|----------------------------------------------------------|--------------------|---------|--|---------------|--------------------------------------------|---------------------|----------------------------------------------------|---------|------|-----------------------|---|---|---|
| GRN                                                      | MH016448405202526E | BARCODE |  |               | Date                                       | 03/02/2026-13:49:50 |                                                    | 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 VSI3_VASAI NO 3 JOINT SUB REGISTRAR          |                    |         |  |               | Full Name                                  |                     | Mohammed Mohsin                                    |         |      |                       |   |   |   |
| Location PALGHAR                                         |                    |         |  |               |                                            |                     |                                                    |         |      |                       |   |   |   |
| Year 2025-2026 One Time                                  |                    |         |  |               | Flat/Block No.                             |                     | Flat No 406 4th Floor B Wing Chawre Tower          |         |      |                       |   |   |   |
| Account Head Details                                     |                    |         |  | Amount In Rs. | Premises/Building                          |                     |                                                    |         |      |                       |   |   |   |
| 0030063301 Registration Fee                              |                    |         |  | 6000.00       | Road/Street                                |                     | Sopara Road Samel Pada Near By Little Flowerschool |         |      |                       |   |   |   |
|                                                          |                    |         |  |               | Area/Locality                              |                     | PALGHAR                                            |         |      |                       |   |   |   |
|                                                          |                    |         |  |               | Town/City/District                         |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               | PIN                                        |                     |                                                    | 4       | 0    | 1                     | 2 | 0 | 3 |
|                                                          |                    |         |  |               | Remarks (If Any)                           |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               | SecondPartyName=ICICI HOME FINANCE COMPANY |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               | LIMITED~CA=1200000                         |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               |                                            |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               |                                            |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               |                                            |                     |                                                    |         |      |                       |   |   |   |
|                                                          |                    |         |  |               | Amount In                                  |                     | Six Thousand Rupees Only                           |         |      |                       |   |   |   |
| Total                                                    |                    |         |  | 6,000.00      | Words                                      |                     |                                                    |         |      |                       |   |   |   |
| Payment Details                                          |                    |         |  |               | FOR USE IN RECEIVING BANK                  |                     |                                                    |         |      |                       |   |   |   |
| Cheque-DD Details                                        |                    |         |  |               | Bank CIN                                   | Ref. No.            | 69103332026020311957                               |         |      | 768304077             |   |   |   |
| Cheque/DD No.                                            |                    |         |  |               | Bank Date                                  | RBI Date            | 03/02/2026-13:50:34                                |         |      | Not Verified with RBI |   |   |   |
| Name of Bank                                             |                    |         |  |               | Bank-Branch                                |                     |                                                    |         |      |                       |   |   |   |
| Name of Branch                                           |                    |         |  |               | Scroll No. , Date                          |                     | Not Verified with Scroll                           |         |      |                       |   |   |   |

Department ID :

Mobile No. :

XXXXXX9415

**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 दस्तांसाठी लागू आहे. नोंदणी न करावयाच्या दस्तांसाठी सदर चलन लागू नाही.