CHALLAN

MTR Form Number-6

GRN	MH018146947202526E	**BARCODE**		**Date**	28/02/2026-21:05:53	**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	CSN3_JT SUB REGI CH _SAMBHAJINAGAR	**Full Name**	Pramod Dinkar Tambat
Location	CHHATRAPATI SAMBHAJINAGAR		
Year	2025-2026 One Time	**Flat/Block No. Premises/Building**	Plot No 42, Gut No 106,Rajmata Jijau Nagar
Account Head Details	**Amount In Rs.**		
0030046401 Stamp Duty	7080.00	**Road/Street**	Near Rma Plaza, At Muje Harsool Pisa Devi Road
		Area/Locality Town/City/District	CHHATRAPATI SAMBHAJINAGAR
		PIN	4 3 1 0 0 1
		Remarks (If Any)	SecondPartyName=ICICI HOME FINANCE COMPANY LIMITED~CA=2360000
Total	7,080.00	**Amount In Words**	Seven Thousand Eighty Rupees Only

Payment Details		**FOR USE IN RECEIVING BANK**			
Cheque-DD Details		Bank CIN	Ref. No.	69103332026030110219	769487999
Cheque/DD No.		Bank Date	RBI Date	28/02/2026-21:06:40	Not Verified with RBI
Name of Bank		Bank-Branch			
Name of Branch		Scroll No. , Date		Not Verified with Scroll	

Department ID : Mobile No. : XXXXXX4818

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 28-02-2026 09:06:51