



CHALLAN
MTR Form Number-6



GRN	MH001713129202627E	BARCODE			Date	29/04/2026-19:30:30		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 PNL3_PANVEL 3 JOINT SUB REGISTRAR					Full Name		Sanidhya Sambhaji Desai					
Location RAIGAD												
Year 2026-2027 One Time					Flat/Block No.		Flat No 101 1st Floor Keshav Kunj Chsl Plot No 11					
Account Head Details				Amount In Rs.		Premises/Building						
0030046401 Stamp Duty				300.00		Road/Street		Sector 26Taloja Panchnand Taluka Panvel				
						Area/Locality		RAIGAD				
						Town/City/District						
						PIN		4 1 0 2 0 8				
						Remarks (If Any)						
						SecondPartyName=ICICI HOME FINANCE COMPANY						
						LIMITED~CA=100000						
						Amount In Three Hundred Rupees Only						
Total				300.00		Words						
Payment Details					FOR USE IN RECEIVING BANK							
Cheque-DD Details					Bank CIN		Ref. No.		03006172026042901962		5259390247	
Cheque/DD No.					Bank Date		RBI Date		29/04/2026-19:31:31		Not Verified with RBI	
Name of Bank					Bank-Branch							
Name of Branch					Scroll No. , Date		Not Verified with Scroll					

Department ID :

Mobile No. :

XXXXXX1195

NOTE:- This challan is valid for document to be registered in Sub Registrar office only. Not valid for unregistered document.

सदर चलन केवल दुस्यम निबंधक कार्यालयात नोंदणी करावयाच्या दस्तांसाठी लागू आहे . नोंदणी न करावयाच्या दस्तांसाठी सदर चलन लागू नाही .