



CHALLAN
MTR Form Number-6



GRN	MH011189494202627E	BARCODE			Date	30/09/2026-19:37:52		Form ID	6(1)	
Department Inspector General Of Registration					Payer Details					
Stamp Duty and Registration Fee together					TAX ID / TAN (If Any)					
Type of Payment Registration Fee					PAN No.(If Applicable)		DGTXXXXXXB			
Office Name NSK5_NASHIK 5 JOINT SUB REGISTRAR					Full Name		SAMEENA ASHAPAK ATTAR			
Location NASHIK										
Year 2026-2027 One Time					Flat/Block No.		FLAT NO A 502 5TH FLOOR A WING			
					Premises/Building		SIGNIFICANT APARTMENT SURVEY NO			
Account Head Details					Amount In Rs.		82/3/A/82/4 OLD S NO 82/3/A			
0030046401 Stamp Duty					7850.00		Road/Street		OPP ASHOKA HOSPITAL WADALA ROAD MAUJE WADALA SHIWAR NASHIK	
0030063301 Registration Fee					13070.00		Area/Locality		NASHIK	
							Town/City/District			
					PIN				4 2 2 0 0 6	
							Remarks (If Any)			
							PAN2=AAACI6285N~SecondPartyName=ICICI HOME FINANCE			
							COMPANY LTD~CA=2612700			
							Amount In Twenty Thousand Nine Hundred Twenty Rupees Only			
Total					20,920.00		Words			
Payment Details PUNJAB NATIONAL BANK					FOR USE IN RECEIVING BANK					
Cheque-DD Details					Bank CIN		Ref. No.		03006172026093002155 5287223403	
Cheque/DD No.					Bank Date		RBI Date		30/09/2026-19:39:53 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. :

XXXXXX3343

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 दस्तासाठी लागू आहे . नोंदणी न करावयाच्या दस्तासाठी सदर चलन लागू नाही .