CHALLAN

MTR Form Number-6

GRN	MH001782494202627E	**BARCODE**		**Date**	30/04/2026-17:27:34	**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	NGP3_JT NAGPUR NO 3 SUB REGISTRAR	**Full Name**	Faizan Akram Sheikh
Location	NAGPUR		
Year	2026-2027 One Time	**Flat/Block No. Premises/Building**	Apartment no 101 102 First Floor Plot no 21 A
Account Head Details	**Amount In Rs.**		
0030063301 Registration Fee	15000.00	**Road/Street**	CTS No 283 Sheet no 4 Mouza Digdoh Hingna
		Area/Locality Town/City/District	NAGPUR
		PIN	4 4 0 0 1 6
		Remarks (If Any)	SecondPartyName=ICICI HOME FINANCE COMPANY LIMITED~CA=3060000
Total	15,000.00	**Amount In Words**	Fifteen Thousand Rupees Only

Payment Details		**FOR USE IN RECEIVING BANK**			
Cheque-DD Details		Bank CIN	Ref. No.	69103332026043014165	772189205
Cheque/DD No.		Bank Date	RBI Date	30/04/2026-17:28:32	Not Verified with RBI
Name of Bank		Bank-Branch			
Name of Branch		Scroll No. , Date		Not Verified with Scroll	

Department ID : Mobile No. : XXXXXX4766

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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