



CHALLAN
MTR Form Number-6



GRN	MH019476864202526E	BARCODE			Date	20/03/2026-12:50:53		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 CSN1_HQR SUB REGI CH SAMBHAJINAGAR					Full Name		Pooja Bhagwan More					
Location CHHATRAPATI SAMBHAJINAGAR												
Year 2025-2026 One Time					Flat/Block No.		SHOP NO. D-8, ON THIRD FLOOR, BIZZ TOWER					
Account Head Details				Amount In Rs.		Premises/Building						
0030046401 Stamp Duty				5220.00		Road/Street		PLOT NO.P-4/1, MIDC CHIKALTHANA, MASNATPUR				
						Area/Locality		CHHATRAPATI SAMBHAJINAGAR				
						Town/City/District						
						PIN		4 3 1 0 0 1				
						Remarks (If Any)						
						SecondPartyName=ICICI HOME FINANCE COMPANY						
						LIMITED~CA=1740000						
						Amount In Five Thousand Two Hundred Twenty Rupees Only						
Total				5,220.00		Words						
Payment Details					FOR USE IN RECEIVING BANK							
Cheque-DD Details					Bank CIN		Ref. No.		69103332026032011771		770400453	
Cheque/DD No.					Bank Date		RBI Date		20/03/2026-12:52:04		Not Verified with RBI	
Name of Bank					Bank-Branch							
Name of Branch					Scroll No. , Date		Not Verified with Scroll					

Department ID :

Mobile No. :

XXXXXX9383

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 .