



CHENNAI METROPOLITAN DEVELOPMENT AUTHORITY
PAYMENT RECEIPT

IndusInd Bank

24/09/2020 16:38



A. APPLICANT DETAILS

| | | | | |
|----|-----------------------------|---|-------------------------|------------|
| 1 | RECEIPT NO | B0017424 | | |
| 2 | APPLICANT NAME * | THE INDIAN MEDICAL PRACTITIONER'S CO-OPERATIVE PHARMACY & STORES LIMITED | | |
| 3 | MOBILE NO* | 9884083432 | | |
| 4 | EMAIL ADDRESS* | NA | | |
| 5 | SITE ADDRESS* | OLD.S.NO 134/1, 134/2 & 134/3, T.S.NO 14, BLOCK NO 23, THIRUVANMIYUR VILLAGE, CHENNAI | | |
| 6 | A LOCAL BODIES ZONE DETAILS | CHENNAI CORPORATION | | |
| 8 | FILE GENERATED | YES | | |
| 9 | DC/FILE/LETTER NUMBER* | CMDA/PP/IND/S/0056/2020 | DATE ON DC/FILE/LETTER* | 18/09/2020 |
| 10 | TOTAL DEMAND VALUE (IN RS) | 1688500.00 | | |

D. REMITTANCE PARTICULARS*

| CHARGES DETAILS | A. VALUE | B. INTEREST | TOTAL VALUE (A+B) |
|------------------------------------|------------|-------------|-------------------|
| DEVELOPMENT CHARGES | 115000.00 | 0.00 | 115000.00 |
| LAYOUT / SCRUTINY CHARGES | 3000.00 | 0.00 | 3000.00 |
| INFRASTRUCTURE & AMENITIES CHARGES | 1048000.00 | 0.00 | 1048000.00 |
| FLAG DAY | 500.00 | 0.00 | 500.00 |
| OTHERS I- PLEASE SPECIFY- CMWSSB | 522000.00 | 0.00 | 522000.00 |
| TOTAL CURRENT PAYMENT RS. | | | 1688500.00 |

AMOUNT IN WORDS : SIXTEEN LAKHS EIGHTY EIGHT THOUSANDS FIVE HUNDREDS ONLY

PAYMENT MODE NEFT/RTGS

| S. NO. | BANK NAME | D.D NO / REF NO | DATE | AMOUNT (RS.) |
|--------|------------|------------------------|------------|--------------|
| 1 | UNION BANK | 000145944941 | 22/09/2020 | 115000.00 |
| 2 | UNION BANK | 000145930184 | 22/09/2020 | 3000.00 |
| 3 | UNION BANK | 000145930673 | 22/09/2020 | 500.00 |
| 4 | UNION BANK | UBINR22020092200140312 | 22/09/2020 | 1048000.00 |
| 5 | UNION BANK | UBINR22020092200133893 | 22/09/2020 | 522000.00 |

**RECEIVED FOR
APPLICANT AND FILE COPY**

W. Ray
Signature of Applicant



**BE Provided for Display Board/
SD For Building / SD for STP**





**CHENNAI METROPOLITAN DEVELOPMENT AUTHORITY
PAYMENT RECEIPT**



14/10/2020 12:41

A. APPLICANT DETAILS

| | | | | |
|----|-----------------------------|---|-------------------------|------------|
| 1 | RECEIPT NO | B0017559 | | |
| 2 | APPLICANT NAME * | THE INDIAN MEDICAL PRACTITIONER'S CO-OPERATIVE PHARMACY & STORES LIMITED | | |
| 3 | MOBILE NO* | 9444487208 | | |
| 4 | EMAIL ADDRESS* | NA | | |
| 5 | SITE ADDRESS* | OLD.S.NO 134/1, 134/2 & 134/3, T.S.NO 14, BLOCK NO.23, THIRUVANMIYUR VILLAGE, CHENNAI | | |
| 6 | A LOCAL BODIES ZONE DETAILS | CHENNAI CORPORATION | | |
| 8 | FILE GENERATED | YES | | |
| 9 | DC/FILE/LETTER NUMBER* | CMDA/PP/IND/S/0056/2020 | DATE ON DC/FILE/LETTER* | 18/09/2020 |
| 10 | TOTAL DEMAND VALUE (IN RS) | 555000.00 | | |

D. REMITTANCE PARTICULARS*

| CHARGES DETAILS | A. VALUE | B. INTEREST | TOTAL VALUE (A+B) |
|------------------------------------|-----------|-------------|-------------------|
| SECURITY DEPOSIT FOR BUILDING | 545000.00 | 0.00 | 545000.00 |
| SECURITY DEPOSIT FOR DISPLAY BOARD | 10000.00 | 0.00 | 10000.00 |
| TOTAL CURRENT PAYMENT RS. | | | 555000.00 |

AMOUNT IN WORDS : FIVE LAKHS FIFTY FIVE THOUSANDS ONLY

PAYMENT MODE. DD

| S. NO. | BANK NAME | D.D NO / REF NO | DATE | AMOUNT (RS.) |
|--------|------------|-----------------|------------|--------------|
| 1 | UNION BANK | 977401 | 12/10/2020 | 10000.00 |
| 2 | UNION BANK | 977299 | 12/10/2020 | 545000.00 |

**RECEIVED FOR
APPLICANT AND FILE COPY**

Signature of Applicant

V. Raj

Signature of Bank Official

