

Government of Tamil Nadu

E-Challan

Payable at - DTO TIRUPUR

Remitter Copy



Challan Number 20250411012122 **Challan Date** 11-Apr-2025 **Payment Date** 11-Apr-2025 17:21:49

Remitter Type Public **Remitter Code** 30 **Remitter Name** SHIVA NIKETAN SCHOOL

Mobile No. 9789192118 **Aadhaar No.** **Remitter Address** POOMALUR PIRIVU MANGALAM

Department 04310-Directorate of Private Schools **District** TIRUPPUR **DDO Code** 32010135

DDO / Office Name DISTRICT EDUCATION OFFICER (PRIVATE SCHOOLS) **Department Transaction ID** **Office Name**

Receipt Type	Sub Type	Acct Code	Amount	Reference No.	Remark
Fees	Application / Inspection/ Verification Fees	020201102AJ22719	2000	04310	APPLICATION FEES

Payment Mode Online **Payment Type** null **Payment Status** Success


Challan Amount (Rs.) 2,000 **Bank Name** SBI

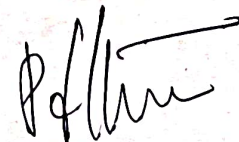
Amount (in words) Two Thousand Rupees only. **Bank ref no.** CPAFAFTKI0

Please Note*, Department Transaction ID and Office Name fields are created only for 4 interface department Registration and Transport and CT for there specific requirements and the values entered in this fields are values passed by them not from IFHRMS.

Please Note*, This is a system generated Challan and does not require signature

Note : FOR INDIAN BANK BRANCHES, PLEASE USE CBS SCREEN NO 424 FOR PERFORMING V COLLECT


PRINCIPAL
SHIVA NIKETAN SCHOOL
S.F.No.78/3A, Poomalur Pirivu
Mangalam - Palladam Road,
TIRUPUR - 641 663.
PH : 80125 93001


CORRESPONDENT
SHIVA NIKETAN SCHOOL
S.F.No.78/3A, Poomalur Pirivu,
Mangalam - Palladam Road,
TIRUPUR - 641 663.
PH : 94437 75000

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Remitter Copy



Challan Number 20250411012069 **Challan Date** 11-Apr-2025 **Payment Date** 11-Apr-2025 17:16:24

Remitter Type Public **Remitter Code** 30 **Remitter Name** SHIVA NIKETAN SCHOOL

Mobile No. 9789192118 **Aadhaar No.** **Remitter Address** POOMALUR PIRIVU MANGALAM

Department 04310-Directorate of Private Schools **District** TIRUPPUR **DDO Code** 32010135

DDO / Office Name DISTRICT EDUCATION OFFICER (PRIVATE SCHOOLS) **Department Transaction ID** **Office Name**

Receipt Type	Sub Type	Acct Code	Amount	Reference No.	Remark
Fees	Inspection / Management Contribution	020201102AJ22705	10000	04310	INSPETICON FEES


Payment Mode Online **Payment Type** null **Payment Status** Success

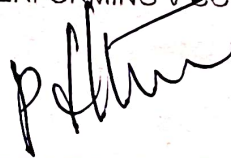
Challan Amount (Rs.) 10,000 **Bank Name** SBI

Amount (in words) Ten Thousand Rupees only. **Bank ref no.** CPAFAFTBB0

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