

SELF-CERTIFICATION FOR THE PURPOSES OF TOURIST TAX EXEMPTION

(declaration pursuant to articles 46-47 of Italian Presidential Decree no. 445/2000 and article 5 of the Municipal Tourist Tax Regulation)

I THE UNDERSIGNED _____ BORN IN _____
ON __/__/____ RESIDENT IN _____ ADDRESS _____ NO. _____ POSTCODE _____
TELEPHONE NO. _____ MOBILE NO. _____ FAX NO. _____ E-MAIL _____

NO. OF PASSPORT OR OTHER ID DOCUMENT _____

HEREBY DECLARE

THAT FROM __/__/____ TO __/__/____ I STAYED AT THE HOTEL ACCOMMODATION _____

AND THAT ONE OF THE CASES OF EXEMPTION AS LAID DOWN IN ART. 5 OF THE MUNICIPAL TOURIST TAX REGULATION APPLIES TO ME, MORE SPECIFICALLY (tick the appropriate box):

Art. 5 letter a)	Art. 5 letter b)	Art. 5 letter c), d) and h)	Art. 5 letter g)
<input type="checkbox"/> I am accompanying, under my own responsibility, the following minors (aged under 18) (specify the tax ID or passport no. or other ID document for foreign citizens): _____ _____ _____ (if the number minors exceeds the number of rows, add a list of names)	<input type="checkbox"/> I am aged under 30 and am staying in a youth hostel managed by public or private bodies for social, cultural and educational purposes.	<input type="checkbox"/> I am a relative or similar accompanying a person in hospital in the province of Milan, specifically: _____ (specify the name of the hospital and/or clinic) for the duration of their stay in hospital. <input type="checkbox"/> I am staying in Milan for the purposes of treatment at a healthcare facility in Milan or the province of Milan following a stay in hospital or am accompanying a person undergoing treatment following a period in hospital. <input type="checkbox"/> I am disabled or am accompanying a disabled person.	<input type="checkbox"/> I am a university student aged under 26 staying at the following accommodation facility, university residence or RTA residence: _____ and attend the following university in the city of Milan (specify the name of the university attended): _____ _____ _____

OR OTHERWISE HEREBY DECALRE

THAT I AM EXEMPT PURSUANT TO ART. 5 LETTER E) AS I AM STAYING IN A RESIDENCE OR HOLIDAY HOME MANAGED BY A NON-PROFIT ASSOCIATION FOR _____ DAYS ABOVE 14 CONSECUTIVE DAYS.

I the undersigned have made this declaration aware of the penal sanctions which may be applied in the event of false declarations, as laid down in art. 76 of Italian Presidential Decree no. 445/2000

This declaration was made pursuant to articles 46 and 47 of Italian Presidential Decree n. 445/2000 and amendments, and presented to the hotel manager.

MILAN, (DATE) __/__/____

DECLARANT'S SIGNATURE _____