

**MODELLO 4 - cliente**

(be retained by the operator the tourist accommodation)

**TOURIST TAX  
DECLARATION TO REFUSAL TO PAY TOURIST TAX**

(Regulation about tourist tax of the City of Agropoli)

THE UNDERSIGNED \_\_\_\_\_

BORN IN \_\_\_\_\_ ON \_\_\_\_/\_\_\_\_/\_\_\_\_

COUNTRY \_\_\_\_\_

ADDRESS \_\_\_\_\_ N. \_\_\_\_\_

ZIP CODE \_\_\_\_\_ TEL \_\_\_\_\_ CELL \_\_\_\_\_

FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

<b>FISCAL CODE</b>																			
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AWARE AS PROVIDED BY LOCAL LAW AND IN PARTICULAR THE REGULATION ABOUT TOURIST TAX WITH RESPECT TO PAYMENT OF PENALTIES FOR FAILING

**DECLARE**

➤ TO OVERNIGHT FROM \_\_\_\_\_ TO \_\_\_\_\_ IN THE ACCOMODATION  
\_\_\_\_\_

DO NOT WANT TO FULLFILL THE PAYMENT OF SCHEDULED FOR THE FOLLOWING REASONS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OBLIGATED BY LAW**

INDICATE THE NAMES OF THE OTHER MEMBERS OF THE GROUP / FAMILY FOR WHICH MADE THE STATEMENT FOR THE SAME PERIOD

N.1 \_\_\_\_\_ N.2\_

N.3 \_\_\_\_\_ N.4\_

N.5 \_\_\_\_\_ N.6\_ \_\_\_\_\_

The amount of the tax not paid is shown below:

A	B	C	
Number of people	Total number of night	Daily tourist tax	Totale (AxBxC)
		€.....	€.....

The undersigned has made these declaration aware of the penalties provided for in case of falsehood and false declarations, as required by art. 76 of Presidential Decree 445/2000, and aware that in case of false statements loses the benefits resulting from the measure adopted on the basis of the statement, as required by art. 75 of Presidential Decree 445/2000.

This declaration is made in accordance to the art. 46 and 47 of Presidential Decree n. 445 of 2000, as amended.

**Information pursuant to EU regulation 2016/679 (G.D.P.R) for the processing of personal data**

*In compliance with the provisions of the EU regulation 2016/679, the City of Agropoli, as legal holder and manager of the processing of personal data, informs you that the data you provide will be processed, even with IT tools, within the limits of legislation for the exclusive purpose of the present proceeding. The manager of the accommodation facility is obliged to keep this declaration for five years, in order to make tax checks possible by the Municipality of Agropoli, which acts as the data controller of the data contained therein.*

**As part of this processing, you may exercise your rights pursuant to the articles 11-20 of the EU regulation 2016/679.**

DATE \_\_\_\_\_

SIGNATURE

\_\_\_\_\_

Il presente modello va conservato a cura della struttura ricettiva ed allegato in copia alla dichiarazione annuale completo di documento di riconoscimento del dichiarante.

Firma per presa visione  
(titolare struttura ricettiva)

\_\_\_\_\_  
(firma)