



Il Colle di Sotto

RESERVATION FORM 1 - Via FAX

ONLY FOR RESERVATIONS – NOT TO BE USED FOR AVAILABILITY REQUESTS
Print it and fax it to this fax number:

+39 0571 993283

Traveller Information

Full Name: _____
Address 1: _____
Address 2: _____
City: _____
State: _____ Zip/Post Code: _____
Country: _____
E-mail: (Very important. Please, spell and write correctly with capital letters) _____
Telephone: _____
Fax: _____

Cancellation policy:

From	To	Cancellation Fee
Reservation	60 days before Check-In	30%
59 days before Check-In	45 days before Check-In	50%
44 days before Check-In	0 hours before Check-In	100%
No Show	-	100%

Payment policy:

When	Type	Amount	By
At reservation	Non-refundable down payment	30%	Credit card or Bank transfer
60 days before Check-In	Final payment	70%	Credit card or Bank transfer
At Check-In	Security deposit (Returned at Check-Out)	€ 300,00	Cash

Signature: (Required) _____
Birth date: (Required) _____

Check-in: _____
Check-out: _____
N° Adults: _____
N° Children: _____

Special Requests:

I have read the Terms and Conditions and I approve them.

Colledisotto.it guaranties that all the given information will be treated according to the Italian Law 196/03 about the Privacy.



Il Colle di Sotto

RESERVATION FORM 2 – CREDIT CARD AUTHORIZATION

If you would like to pay by credit card, please submit this completed form and fax it, with RESERVATION FORM 1, to this fax number:

+39 0571 993283

Authorized charge amount (30%) Non-refundable down payment

Visa/MasterCard/Amex/Diners number: _____

Expiration date: _____

Cardholder name: _____

Cardholder address, including Zip Code:

Telephone: _____

I give “Il Colle di Sotto” permission to charge the indicated amount to the credit card number given. I certify that I am an authorized signer on the account.

Signature: _____

Date: _____

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OTHERWISE

If you would like to pay by BANK TRANSFER, please use this bank information below and then fax your bank payment, with RESERVATION FORM 1, to this fax number:

+39 0571 993283

Account name: Il Colle di Sotto di Mazzoni Alberto & C. s.n.c.

Bank name: CASSA DI RISPARMIO DI LUCCA PISA LIVORNO

Branch address: Via Fratelli Rosselli 30 - 50053 Empoli (FI)

Bank code (ABI): 06200

Branch code (CAB): 37831

Account number (C/C): 178194

IBAN code: IT16A0620037831000000178194

SWIFT Code: BPALITL1763

Once the reservation is confirmed and the down payment is received, a voucher will be issued. This voucher must be printed and shown to “Il Colle di Sotto” when you arrive.