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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| RegionMurciaColor | | | | | | **Consejería de Turismo y Cultura**  **Instituto de Turismo de la Región de Murcia**  Avda. Juana Jugán, 2 - 30006 Murcia  Tfnos. **012** **/ 968 362 000**  [www.carm.es](http://www.carm.es) | | | | | | | | | | | | | | **CLASIFICACIÓN PREVIA DE ESTABLECIMIENTOS TURÍSTICOS** | | | | | | | | |
| **Registro de entrada** | | | | | | | | |
| **Solicitud clasificación previa** | | | | | | | | | | | | **P-1888** | | | | | | | |
| **1** | | **DATOS DEL SOLICITANTE** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APELLIDOS Y NOMBRE / RAZÓN SOCIAL | | | | | | | | | | | | | | | | | | | | | | | | NIF/NIE/CIF | | | | |
| DOMICILIO (CALLE/PLAZA, NÚMERO, PISO Y PUERTA) | | | | | | | | | | | | | C. POSTAL | | | | LOCALIDAD | | | | | | | | PROVINCIA | | | |
| TELÉFONO FIJO | | | | TELÉFONO MÓVIL | | | | | | CORREO ELECTRÓNICO | | | | | | | | | | | | | FAX | | | | | |
| **2** | | **DATOS DEL REPRESENTANTE LEGAL** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| APELLIDOS Y NOMBRE | | | | | | | | | | | | | | | NIF/NIE | | | | | | REPRESENTANTE LEGAL | | | | | | | |
| DOMICILIO (CALLE/PLAZA, NÚMERO, PISO Y PUERTA) | | | | | | | | | | | | | C. POSTAL | | | | LOCALIDAD | | | | | | | | | PROVINCIA | | |
| TELÉFONO FIJO | | | | TELÉFONO MÓVIL | | | | | CORREO ELECTRÓNICO | | | | | | | | | | | | FAX | | | | | | | |
| **3** | | **DATOS DEL ESTABLECIMIENTO** | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DENOMINACIÓN COMERCIAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DOMICILIO (CALLE/PLAZA, NÚMERO, PISO Y PUERTA) | | | | | | | | | | | | | | | | C. POSTAL | | | LOCALIDAD | | | | | | | | | |
| TELÉFONO FIJO | | | TELÉFONO MÓVIL | | | | | CORREO ELECTRÓNICO | | | | | | | | | | | | | | | | | | | FAX | |
| PÁG. WEB | | | | | | | | | | | | | | | | | | |
| **4** | | GRUPO, CATEGORÍA Y ESPECIALIDAD QUE SOLICITA | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HOTEL | Categoría | | | | 1 estrella **🗆** | | 2 estrellas **🗆** | | | | 3 estrellas **🗆** | | | 4 estrellas **🗆** | | | | 5 estrellas **🗆** | | | | Con Comedor **🗆** | | | | | | Sin Comedor **🗆** |
| HOTEL -APARTAMENTO | Categoría | | | | 1 estrella **🗆** | | 2 estrellas **🗆** | | | | 3 estrellas **🗆** | | | 4 estrellas **🗆** | | | | 5 estrellas **🗆** | | | | Con Comedor **🗆** | | | | | | Sin Comedor **🗆** |
| PENSIÓN | Categoría | | | | 1 estrella **🗆** | | 2 estrellas **🗆** | | | |  | | |  | | | |  | | | | Con Comedor **🗆** | | | | | | Sin Comedor **🗆** |
| APARTAMENTO | Categoría | | | | Lujo **🗆** | | Primera **🗆** | | | | Segunda **🗆** | | | Tercera **🗆** | | | |  | | | |  | | | | | |  |
| CASA RURAL DE ALQUILER |  | | | |  | |  | | | |  | | |  | | | |  | | | |  | | | | | |  |
| CASA RURAL COMPARTIDA |  | | | |  | |  | | | |  | | |  | | | |  | | | |  | | | | | |  |
| HOSPEDERÍA RURAL |  | | | |  | |  | | | |  | | |  | | | |  | | | |  | | | | | |  |
| **5** | | **OBSERVACIONES** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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El que suscribe, solicita del Instituto de Turismo, sea emitido el correspondiente informe de clasificación previa.

En \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_a \_\_\_\_\_\_\_\_\_\_de\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_de 20\_\_\_\_

Firmado:

El titular / El representante legal D. /Dª \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ILMO/A. SR./SRA. DIRECTOR/A GENERAL DEL INSTITUTO DE TURISMO**