## FORMAT FOR THE TOUR OPERATOR

Date:		
To The Consulate General of Italy Kanchanjunga, 72 G. Deshmukh Marg, Mumbai		
Dear Sir/Madam,		
Ref: ISSUANCE OF GROUP/INCENTIVE TOURIST VISAS.		
This is to confirm that the following passengers are booked on a package Tour of (Europe or Italy to be specified) with (the name of the agency):		
SPECIFIY the following:	FLIGHT DETAILS ITINERARY DATES HOTELS	
Name of the Passengers	Date of birth	Passport No.
1) 2) 3) n)		
We hereby declare that the total cost of the tour is The payment has been made to us (Name of the Agency) by the above mentioned passengers. The copies of the Payment Receipts are enclosed herewith.		
This is to inform that the above mentioned passengers will be traveling with a confirmed air ticket and Overseas Mediclaim Policy for their complete stay in (Europe or Italy to be specified).		
(Name of the agency) under our own deputation hereby declare that the original documents have been verified by us.		
(Name of the agency) will ensure that all of our customers have the requisite foreign exchange endorsed by the Reserve Bank of India (as per the Govt. of India rules).		

All the arrangements for the Tour endorsed in (Europe or Italy to be specified) have been

organized by (name and address of the agent in Europe).

For Incentive Groups organized by Corporate Houses, the applicants are required to submit the Dealership Agreement, where applicable.

(Name of the agency) will hand all the passports over to the Consulate General of Italy, within one day of their return from the tour for verification purpose.

(Name of the agency) is aware that in case the passenger/s fail to return back to India, (Name of the agency) will be held responsible and will therefore be blacklisted and will be debarred from submitting any further visa documents at the Consulate General of Italy.

Thanking you,

Signature