

IZJAVA GOSTOV V APARTMAJIH TOP LINE / ALLURE  
GUEST STATEMENT IN APARTMENTS TOP LINE / ALLURE

Ime Name	Priimek Surname	Datum rojstva Date of birth	Podpis Signature	Pogoj # Condition #

Vsi zgoraj podpisani izjavljamo, da izpolnjujemo vladne ukrepe za namestitve v apartmaju:  
All above persons state that we comply with Slovenia's government restrictions.

Ime apartmaja: Apartment name:	
Datum prihoda: Arrival date:	
Datum odhoda: Departure date:	

Izpolnjujemo **enega od** spodnjih pogojev:  
We fulfill one of the below mentioned conditions:

1.	Cepljeni proti COVID-19 z enim od priznanih cepiv in od prvega/drugega odmerka je minilo več kot zakonski minimum. We have been vaccinated with one of the COVID-19 recognised vaccines and that the minimum days have passed since 1st or 2nd dose.
2.	Imam PCR ali HAT test, mlajši od 48 ur. I have a negative PCR or quick swab test, younger than 48 hours.
3.	Sem prebolel novi Koronavirus med 21 dnevi in 180 dnevi ter imam potrdilo. I have been cured from COVID-19 more than 21 days but less than 180 days ago.