

## **Full information**

Recording date: 2/3/09 Type Hotel Name HOTEL SEMPIONE Category 3 STARS Address VIA NAZIONALE, 15 Town FIRENZE Province FIRENZE Telephone 055-212462 055-283012 Fax 055-212463 E-mail info@hotelsempione.info Internet | www.hotelsempione.info Hours of public service 24 ore Closing day or closing time december 20 to 27 Position town center Person in charge of: Giorgio Neri Surrouning land level roads Qualification Executive Manager Height of place a.s.l., mt. 50 Distance from nearest stop, mt. Spoken languages?: Services offered by the structure: **Transport towards structure Urban bus** Italian **Generic room** 100 **English Breakfast room** Spanish **French** German **Portuguese** The following payment is accepted Are there generic plans of the structure? No Are there tactile plans of the structure? No ΑII Are there generic brochures of the structure? Yes Are there printed information brochures in Braille? No Information availability on: Available transport for internal or external mobility: Sound record None rents wheelechairs and crutchs l'Humanitas noleggia carrozine e

0015

| Period when open:   | Annual   |  |   |  |
|---|--|--|---|--|
| Service method:   | B&B  |  |   |  |
|   |  |  |   |  |
|   |  |  |   |  |
|   |  |  |   |  |
| Is Room Service available?  | Yes  |  |   |  |
| Are reame declared accessible by the manager?   | Th.  | nere are menus f                             | Four                                      |  |
| Are rooms declared accessible by the manager?   | 163  | There are menus for.                         |   |  |
| How many?   | 2  |  |   |  |
| Are rooms declared anti-allergic by the manager?  | No   |  |   |  |
| How many?   |  |  |   |  |
|   |  |  |   |  |
| Which public structures are present in the tow  |  | ,  | 1   |  |
|   | vice structures in the   |  | Service structures in the provincial area |  |
| Emergency room  | t information office   | ce   |   |  |
| Neuropsychiatry   |  |  |   |  |
|   |  |  |   |  |
|   |  |  |   |  |
|   |  |  |   |  |
| Are there emergency exits?  |  |  |   |  |
| The alarm is: Acoustic  |  |  |   |  |
| Notes:  |  |  |   |  |
| In case of call from international cellphone a  |  |  |   |  |
| - Hospital: Ospedale di S.M. Nuova P.za S.I<br>- First Aid: Misericordia di Firenze P.za Duo  |  | el. 055-27.58. <sup>,</sup><br>el. 055-23939 |   |  |
| - Eyes Surgeon: Oculista Laganà via dei Ma  |  | el. 055-23.81.6                              |   |  |
| - Touristic Informations: P.za della Stazione   | t  | tel. 055-21224                               | 45  |  |
| - Touristic Informations: Borgo Santa Croce   | 29 te  | el. 055-23.40.4                              | 444                                       |  |
| - Touristic Informations: Via Manzoni, 16   |  | tel. 055-23.32                               | 2.0                                       |  |
| - Car Repair special equipment: Autofficina,  |  |  | 3   |  |
| <ul> <li>Special equipment car repair and rental - A<br/>via di Collodi, 10/20</li> </ul>   | utofficina Pogges  | si,<br>tel. 339-40.                          | 40 759                                    |  |
| - Car Rental: Autonoleggio Auto via dè Catta  |  | el. 055-30.24.                               | 436                                       |  |
| - Bike and scooter rental: via S. Zanobi, 120   | r t  | tel. 055-48.89.                              | .92                                       |  |
|   |  |  |   |  |
| GENERAL SUMMARIZING NOTES DESCRIB   | NG THE STRUCT  | URE  |   |  |
| The Sempione hotel access is conditioned by an  |  | main entrance,                               | to overcome with a removable ramp.        |  |
| On the ground floor, there are no particular proble<br>There are the TV and bar rooms and an internet   |  |  |   |  |
| The hotel is equipped of two accessible rooms   | The hotel is equipped of two accessible rooms with bathrooms inside, one to the second and one to the third floor. The inner |  |   |  |
| pathways from the room to the elevator are regular and free of furnishings.  Breakfast room is on the mezzanine, after the first floor.   |  |  |   |  |
| There are three steps to overcome with a removable metal ramp with approximately 20% slope. The hotel has an agreement with a paying garage parking service that picks-up/return the car on demand. |  |  |   |  |
| 3   | . 5  | ,  |   |  |
|   |  |  |   |  |
|   |  |  |   |  |

0015 2/2

### **PARKING LOT / CAR PARK**

|        | Н  | OTEL SEMPIONE                              |               |
|--------|--|--|---------------|
|        | Type of parking lot:   | t: Garage<br>Paying<br>Covered             |               |
|        | Is there an intercom system?   | ? Type?                                    |               |
|        | Height, cm   | n  |               |
|        | Obstacles:   | s:   |               |
|        |  |  |               |
|        |  |  |               |
|        | The distance is mt   | nt   |               |
|        | Type of path:  | ı: [                                       |               |
|        | Type of pavement:  | :  |               |
|        | Possible difficulties encountered along the way:                                     |  |               |
|        |  |  |               |
|        | Is it connected directly to the structure?   |  |               |
| Ву:    |  | LEVEL OF SATISFACTION OF NEEDS             |               |
|        |  | Person with food allergies                 |               |
|        |  | Person with allergies                      | $\overline{}$ |
|        | Are there direction signs?   | Family with children in stroller/pram Good | _             |
|        |  | Obese person or pregnant woman Good        |               |
|        |  | Fideshy lame heart nations                 | <u>_</u>      |
|        | Are tactile guides present?  | Good                                       |               |
|        |  | Deaf or hearing impaired person Good       |               |
| Notes: | The hotel has an agreement with a paying garage parking service that picks-up/return | Blind or visually impaired person Good     |               |
|        | the car on demand. The service is made by the hotel staff.                           | Person in wheel-chair with companion Good  |               |
|        | The hotel has two reserved places at S. M. Novella parking.                          | Person in wheel-chair alone Good           |               |

### **ENTRANCE**

| HOTEL SEMPIONE                           |           |             |
|--|-----------|-------------|
|  |           |             |
| Entrance:                                | Principal |             |
| Width, cm                                | 108       |             |
|  |           |             |
| Are there stairs?                        | Yes       | How many? 1 |
| Are they chromatically marked?           | No        |             |
| Are there any aids to bypass the stairs? | Yes       |             |
| Which?                                   | stairs    |             |
|  |           |             |
|  |           |             |
|  |           |             |
| Are there chromatic-optical contrasts?   |           |             |
| What do they point out?                  |           |             |
|  |           |             |
| Is there an intercom system?             | bell      |             |
|  |           |             |
| Height cm                                | 131       |             |
| Obstacles:                               |           |             |
|  |           |             |
|  |           |             |
| Type of entrance door opening:           | revolving |             |
| Conditions:                              | manual    |             |

| o overcome the stepsan occasional ramp is available. |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

| Person with food allergies            |    |         |
|---------------------------------------|----|---------|
| Person with allergies                 |    |         |
| Family with children in stroller/pram |    | Partial |
| Obese person or pregnant woman        |    | Partial |
| Elderly, lame, heart patient          |    | Partial |
| Deaf or hearing impaired person       |    | Good    |
| Blind or visually impaired person     | A. | Partial |
| Person in wheel-chair with companion  | Å  | Good    |
| Person in wheel-chair alone           |    | Partial |

### **HOTEL SEMPIONE**

| Function noted:                           | hotel  |                       |  |
|---|--------|-----------------------|--|
| Counter height, cm                        | 110    | Narrowest passage, cm |  |
| Steps?                                    | No     |                       |  |
| How many grouped together?                |        |                       |  |
| How many isolated?                        |        |                       |  |
| Presence of obstacles for mobility?       | No     |                       |  |
| Yes, what are they :                      |        |                       |  |
| res, what are they .                      |        |                       |  |
| Systems for dialogue, useful information: | Verbal |                       |  |
|   |        |                       |  |
|   |        |                       |  |
|   |        |                       |  |

### Notes:

| Person with food allergies            | Å    |         |
|---------------------------------------|------|---------|
| Person with allergies                 | Å    |         |
| Family with children in stroller/pram | A EM | Good    |
| Obese person or pregnant woman        |      | Good    |
| Elderly, lame, heart patient          |      | Good    |
| Deaf or hearing impaired person       |      | Partial |
| Blind or visually impaired person     | M    | Good    |
| Person in wheel-chair with companion  |      | Good    |
| Person in wheel-chair alone           |      | Partial |

### **INTERNAL PATHWAYS**

|  |  | Card number |       |
|--|--|-------------|-------|
| Н  | OTEL SEMPIONE                            |             |       |
| MOBILITY OR DIRECTION P                                  | PROBLEMS NOTICED ON THE P                | PATHWAYS    |       |
|  | NO 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | ********    |       |
| FROM: Elevator entrance                                  |  |             |       |
| TO:  |  |             |       |
| Breakfast room   |  |             |       |
| PROBLEMS?  |  |             |       |
| Type of obstacle: Three steps for a total high of 51 cm. |  |             |       |
| Notes:   | LEVEL OF SATISFACTION O                  | 2           |       |
|  |  | %           |       |
|  | Person with allergies                    | Å [         |       |
|  | Family with children in stroller/pram    | Par         | rtial |
|  | Obese person or pregnant woman           | Par         | rtial |
|  | Elderly, lame, heart patient             | Par         | rtial |
|  | Deaf or hearing impaired person          | Go          | ood   |
|  | Blind or visually impaired person        | Pai         | rtial |
|  | Person in wheel-chair with companion     |             | rtial |
|  | Person in wheel-chair alone              | O           | rtial |

### **HOTEL SEMPIONE**

| Are stairs present?       | Yes          |
|---------------------------|--------------|
|                           |              |
| Width, cm                 | 122          |
|                           |              |
| Flight of stairs n.       | 3            |
|                           |              |
| Total number of stairs n. | 81           |
|                           |              |
| Connecting from:          | ground       |
|                           |              |
| То:                       | fourth       |
|                           |              |
| Is there a hand rail:     | To the right |
|                           |              |
|                           |              |

### Notes:

## The stairway is inside of the hotel and it's the only emergency exit.

| Person with food allergies            | Ŝ     |         |
|---------------------------------------|-------|---------|
| Person with allergies                 | Ř     |         |
| Family with children in stroller/pram |       |         |
| Obese person or pregnant woman        |       | Partial |
| Elderly, lame, heart patient          |       | Partial |
| Deaf or hearing impaired person       | \[ \] | Partial |
| Blind or visually impaired person     | A.    | Partial |
| Person in wheel-chair with companion  | M     |         |
| Person in wheel-chair alone           |       |         |

|                             |                    | НО         | TEL SEM    | PIONE           |                 |               |     |    |
|-----------------------------|--------------------|------------|------------|-----------------|-----------------|---------------|-----|----|
| Present?                    | Yes                |            | Is         | a service key   | necessary?      | No            |     |    |
| Where is the key kept ?     |                    |            |            |                 | L               |               |     |    |
| Instructions for use:       |                    |            |            |                 |                 |               |     |    |
| Connected from:             | ground             |            |            |                 |                 |               |     |    |
| То:                         | thord              |            |            |                 |                 |               |     |    |
| Interior width, cm          | 120                | Entrar     | nce, cm 73 |                 | Inter           | ior depth, cm | 80  |    |
| Entrance type:              | Single door        |            |            |                 |                 |               |     |    |
| Interior push-button panel: | In Braille and re  | elief      |            |                 | Maximum         | height of cm  | 131 |    |
| Acoustic signal of arrival  | at floor: Acoustic | c and visi | ual        |                 |                 |               |     |    |
| Is an intercom or emergency | button present?    | Yes        |            |                 |                 | Height, cm    | 131 |    |
| Notes:                      |                    |            | LE         | VEL OF SA       | TISFACTIO       | N OF NEED     | s   |    |
|                             |                    |            |            | Person wi       | th food allergi | 71/7          |     |    |
|                             |                    |            |            | Perso           | on with allergi | es 🕺          |     |    |
|                             |                    |            | Family     | with children   | in stroller/pra | m Asi         | Go  |    |
|                             |                    |            | Obes       | se person or p  | regnant woma    | an 🖔          | Go  |    |
|                             |                    |            |            | Elderly, lan    | ne, heart patie | nt Alleria    | Go  |    |
|                             |                    |            | De         | af or hearing i | impaired perso  |               | Go  |    |
|                             |                    |            | Blin       | d or visually i | impaired perse  | 1101          | Go  |    |
|                             |                    |            | Person in  | wheel-chair     | with companio   | on 🖺          | Go  |    |
|                             |                    |            |            | Person in wh    | neel-chair alo  |               | Go  | od |

### **ROOMS/SERVICES**

### **HOTEL SEMPIONE**

| Туре:                               | hotel                              |
|-------------------------------------|------------------------------------|
| Name of room:                       | Bar area                           |
| Hall / service is located on floor: | ground floor                       |
| Number of seats n.                  | 6                                  |
|                                     |                                    |
| Entrance, cm                        |                                    |
| Narrowest passage, cm               |                                    |
| Is there sufficient s               | pace for wheel-chair rotation? Yes |
| Are there reserved seats?           | no                                 |
| How many?                           |                                    |
| Relations with the public are:      |                                    |
|                                     |                                    |
|                                     |                                    |
| Height of buffet, cm                |                                    |
| Height of counter, cm               | 110                                |

### Notes:

## Bar and internet point area are a little narrow

| Person with food allergies            | Å     |         |
|---------------------------------------|-------|---------|
| Person with allergies                 | Ř     |         |
| Family with children in stroller/pram |       | Partial |
| Obese person or pregnant woman        |       | Partial |
| Elderly, lame, heart patient          |       | Partial |
| Deaf or hearing impaired person       | \[ \] | Good    |
| Blind or visually impaired person     | Å.    | Good    |
| Person in wheel-chair with companion  |       | Partial |
| Person in wheel-chair alone           |       | Partial |

### **ROOMS/SERVICES**

### HOTEL SEMPIONE

| Туре:   | hotel        |  |
|---|--------------|--|
| Name of room:                                       | Tv room      |  |
| Hall / service is located on floor:                 | ground floor |  |
| Number of seats n.                                  | 6            |  |
|   |              |  |
| Entrance, cm  | 150          |  |
| Narrowest passage, cm                               |              |  |
| Is there sufficient space for wheel-chair rotation? |              |  |
| Are there reserved seats?                           | no           |  |
| How many?   |              |  |
| Relations with the public are:                      |              |  |
|   |              |  |
| Height of buffet, cm                                |              |  |
| Height of counter, cm                               | 110          |  |

### Notes:

| Person with food allergies            | Å     |         |
|---------------------------------------|-------|---------|
| Person with allergies                 | Ř     |         |
| Family with children in stroller/pram |       | Partial |
| Obese person or pregnant woman        |       | Partial |
| Elderly, lame, heart patient          |       | Partial |
| Deaf or hearing impaired person       | \[ \] | Good    |
| Blind or visually impaired person     | M     | Good    |
| Person in wheel-chair with companion  | M     | Partial |
| Person in wheel-chair alone           |       | Partial |

### **ROOMS/SERVICES**

### **HOTEL SEMPIONE**

| Туре:                               | hotel                               |
|-------------------------------------|-------------------------------------|
| Name of room:                       | Breakfast room                      |
| fall / service is located on floor: | first                               |
| Number of seats n.                  | 31                                  |
|                                     |                                     |
| Entrance, cm                        | 99                                  |
| Narrowest passage, cm               |                                     |
| Is there sufficient s               | space for wheel-chair rotation? Yes |
| Are there reserved seats?           | no                                  |
| How many?                           |                                     |
| Relations with the public are:      |                                     |
|                                     |                                     |
| Height of buffet, cm                | 77 / 113 / 140                      |
| Height of counter, cm               | 100/135                             |

### Notes:

Breakfast is served on the table, the buffet is on different floors.
To access the breakfast room there are three steps to overcome with a aluminum removable ramp with 20% slope.
Tables in the corridor to access the room can be removed in case of disabled passing.

| Person with food allergies            | Å | Partial |
|---------------------------------------|---|---------|
| Person with allergies                 | Ř |         |
| Family with children in stroller/pram |   | Partial |
| Obese person or pregnant woman        |   | Partial |
| Elderly, lame, heart patient          |   | Partial |
| Deaf or hearing impaired person       |   |         |
| Blind or visually impaired person     | M | Partial |
| Person in wheel-chair with companion  | M | Partial |
| Person in wheel-chair alone           |   | Partial |

### **BEDROOM**

### **HOTEL SEMPIONE**

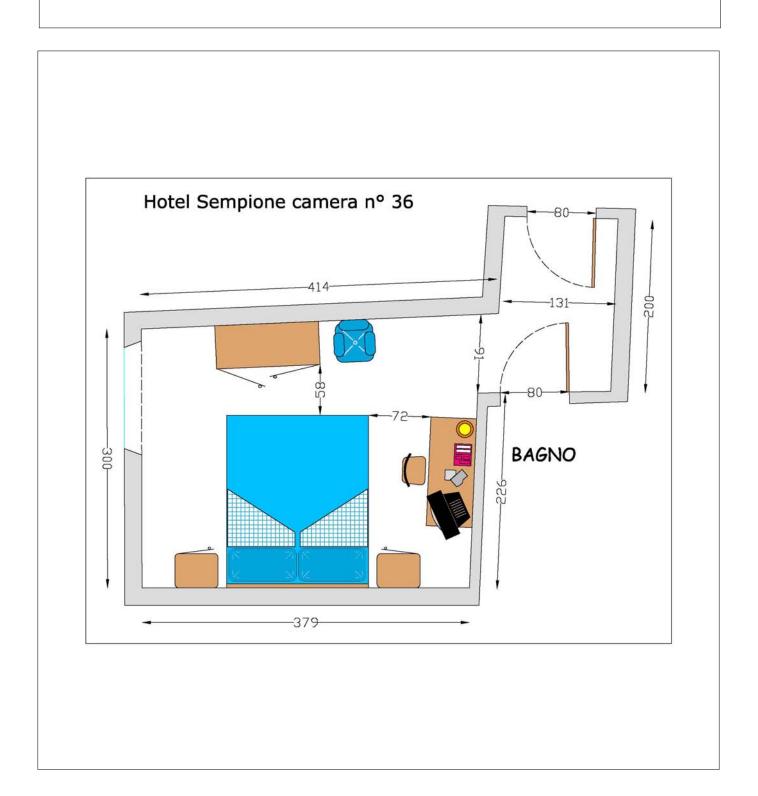
| Туре:                              | hotel               |     |
|------------------------------------|---------------------|-----|
| Number - Name:                     | 36                  |     |
| Situated on floor:                 | terzo               |     |
| Type of room:                      | Twin                |     |
|                                    | [                   |     |
| Anti-allergenic room?              | Yes:                |     |
|                                    |                     |     |
|                                    |                     |     |
| - New Man                          |                     |     |
| The room is: No smoking            |                     |     |
| Width of entrance door cm          | 80                  |     |
| Internal door, cm                  | 91                  |     |
| Other:                             |                     |     |
| Is there sufficient space for whee | el-chair rotation ? | ⁄es |
| Other:                             | bed to be remove    | ed  |
| Narrowest passage, cm              |                     |     |
| Description:                       |                     |     |
| Presence of carpeting?             | No                  |     |
| Are there internal stairs?         | No                  |     |
| Where?                             |                     |     |
|                                    |                     |     |
| Is it possible                     |                     | ∕es |
|                                    | Bed height, cm      |     |
| ls it possible to m                | odify bed height?   | No  |
|                                    | from cm to cm       |     |

| Is it possible to mo                             | ove the furniture?               | Yes<br>Si     |
|--|----------------------------------|---------------|
| Is there a bathroom in the room?                 | Voc                              |               |
|  | res                              |               |
| Bath on the floor at a distance of mt            |                                  |               |
| Is th  | ere a telephone?                 | Yes           |
|  |                                  |               |
| Alarm system:                                    | no                               |               |
| are there obstacles along the passagew<br>to the | ay from the room emergency exit? | No            |
| Which?   |                                  |               |
| Where do the escape routes lead to:              | inaccessible en                  | nergency exit |
|  |                                  |               |
|  |                                  |               |

Accessible rooms numbers are: 26, 36 similar in disposition and dimensions.

| Person with food allergies            | Ñ |         |
|---------------------------------------|---|---------|
| Person with allergies                 | Å | Partial |
| Family with children in stroller/pram |   | Good    |
| Obese person or pregnant woman        |   | Good    |
| Elderly, lame, heart patient          |   | Good    |
| Deaf or hearing impaired person       |   | Partial |
| Blind or visually impaired person     | M | Partial |
| Person in wheel-chair with companion  |   | Good    |
| Person in wheel-chair alone           |   | Good    |

Which side of the structure does the floor plan refer to?



### WC/BATHROOM/RESTROOM

| HOTEL SEMPIONE                   |  |                |    |
|----------------------------------|--|----------------|----|
| Service:                         |  |                |    |
|                                  | room                                   |                | 26 |
| In:                              | room                                   | Number - name: | 30 |
| Situated on floor:               | third                                  |                |    |
|                                  |  |                |    |
| Anteroom?                        | No                                     |                |    |
| Entrance door, cm                |  |                |    |
| Basin?                           |  |                |    |
| Туре:                            |  |                |    |
| Type of basin faucet:            |  |                |    |
| Type of basili faucet.           |  |                |    |
| Space in front of the faucet, cm |  |                |    |
|                                  |  | 1              |    |
| Presence of:                     | Bathroom                               |                |    |
| Entrance door, cm                | 80                                     |                |    |
| Basin?                           | Yes                                    |                |    |
| Туре:                            | suspended                              |                |    |
| Type of basin faucet:            | lever                                  |                |    |
|                                  | 150                                    |                |    |
| Space in front of the faucet, cm |  |                |    |
| Type of toilet:                  | floor toilet with external hand shower |                |    |
| Space in front of toilet, cm     | 160                                    |                |    |
| Space to the right of toilet, cm | 28                                     |                |    |
| Space to the left of toilet, cm  | 125                                    |                |    |
| Height of toilet, cm             | 52                                     |                |    |
| Bidet?                           | No                                     |                |    |
| Handles to the right of toilet?  | No                                     |                |    |
| Handles to the left of toilet?   | Yes                                    |                |    |
|                                  |  |                |    |

| Shower?                       | Yes       |
|-------------------------------|-----------|
| Type of shower:               |           |
| Shower provided with seat?    | Yes       |
| Туре:                         | removable |
| Shower provided with handles? | Yes       |
| Bathtub?                      | No        |
| Туре:                         |           |
| Provided with internal seat?  |           |
| Provided with handles?        |           |
| Provided with lifter?         |           |
| Model:                        |           |
|                               |           |

| Person with food allergies            |    |         |
|---------------------------------------|----|---------|
| Person with allergies                 |    |         |
| Family with children in stroller/pram |    | Good    |
| Obese person or pregnant woman        |    | Partial |
| Elderly, lame, heart patient          |    | Partial |
| Deaf or hearing impaired person       |    | Good    |
| Blind or visually impaired person     | A. | Good    |
| Person in wheel-chair with companion  |    | Good    |
| Person in wheel-chair alone           |    | Partial |

### WC/BATHROOM/RESTROOM

| HOTEL SEMPIONE   |                      |                |  |
|--|----------------------|----------------|--|
| Service:   |                      |                |  |
| In:  | public               | Number - name: |  |
| Situated on floor:   |                      |                |  |
| Anteroom?  | No                   |                |  |
| Entrance door, cm  |                      |                |  |
| Basin?   |                      |                |  |
| Туре:  |                      |                |  |
| Type of basin faucet:  |                      |                |  |
| Space in front of the faucet, cm                                 |                      |                |  |
| Presence of:   | -Restroom            |                |  |
| Entrance door, cm  | 60                   |                |  |
| Basin?   | Yes                  |                |  |
| Туре:  | sospeso<br>suspended |                |  |
| Type of basin faucet:  | pedal                |                |  |
| Space in front of the faucet, cm                                 | 93                   |                |  |
| Type of toilet:  |                      |                |  |
| Space in front of toilet, cm<br>Space to the right of toilet, cm |                      |                |  |
| Space to the left of toilet, cm                                  |                      |                |  |
| Height of toilet, cm   |                      |                |  |
| Bidet?   |                      |                |  |
| Handles to the right of toilet?                                  |                      |                |  |
| Handles to the left of toilet?                                   |                      |                |  |
|  |                      |                |  |

| Shower?                       |  |
|-------------------------------|--|
| Type of shower:               |  |
| Shower provided with seat?    |  |
| Туре:                         |  |
| Shower provided with handles? |  |
| Bathtub?                      |  |
| Туре:                         |  |
| Provided with internal seat?  |  |
| Provided with handles?        |  |
| Provided with lifter?         |  |
| Model:                        |  |
|                               |  |

## Not accessible.

| Person with food allergies            | (0 0) |         |
|---------------------------------------|-------|---------|
| Person with allergies                 |       |         |
| Family with children in stroller/pram |       | Partial |
| Obese person or pregnant woman        |       | Partial |
| Elderly, lame, heart patient          |       | Partial |
| Deaf or hearing impaired person       |       | Good    |
| Blind or visually impaired person     |       | Good    |
| Person in wheel-chair with companion  |       | Partial |
| Person in wheel-chair alone           |       | Scarce  |

Which side of the structure does the floor plan refer to?

