

Ticket Provider Report

Licence Holder: ATOL No:

Period from : to :
12 month period

This report relates to the turnover earned by the licence holder as a "ticket provider" during the latest financial year. Please refer to the Civil Aviation (Air Travel Organisers' Licensing) Regulations 1995, a Guide to ATOL and Guidance Note 10 for an explanation of sales that may be classified as "ticket provider".

Confirmation by the ATOL Holder

I, the undersigned, have read the relevant Regulations and guidance issued by the CAA and confirm that in the twelve month period stated above, sales made by this firm as a "ticket provider" were:

Amount: £ Amount in words

Print Name:

Signed: Date:

Position:

Report of the Accountants - Ticket Provider Turnover

In accordance with the model contract dated 15 August 2003 set out in CAA Guidance Note 10, we confirm that the turnover which arose from the licence holder acting as a ticket provider over the period stated above has been tested in accordance with the schedule of work set out in appendix 4(a) of Technical Release Audit 02/03 issued by the Institute of Chartered Accountants in England and Wales. Accordingly, for a sample of bookings, we checked the reservation or ticketing system and noted in each case that the ticket was recorded as having been issued to the customer either promptly at the point when the payment was made or within 24 hours where the booking was not made in the presence of the customer.

Our report is prepared solely for the confidential use of the ATOL holder, the CAA and the Air Travel Trust, and solely for the purpose of reporting to the CAA on the company's licensable turnover. Our report must not be recited or referred to in whole or in part in any other document. Our report must not be made available, copied or recited to any other party without our express written permission. We neither owe nor accept any duty to any other party and shall not be liable for any loss, damage or expense of whatsoever nature which is caused by other parties' reliance on our report.

Print Name:

Signed: Date:

Registered Company Name:

Address:

Postcode: