## **Consumer Protection Group Air Travel Organisers' Licensing**

## **Quarterly ATOL Holder's Report**



This Form can be completed on-line before printing off and signing where required

ATOL Holder:	ATOL No:	
Period from:	To:	
Start date (dd/mm/yyyy)	End date (dd/mm/yyyy)	
PART A – LICENSABLE PASSENGER NUM	IBERS AND RELATED REVENUE ON A	BOOKING DATE BASIS
APC Account Ref. Number:		
Complete the number of <b>passengers books</b> apply to you insert a zero in the relevant box		
Sub category of Business	Passengers booked*	Revenue (gross invoice value)
Flight-Only		£
flight inclusive package		£
Flight-Plus		£
Total Public Sales category		£
* The figure for passengers booked should i <b>deducted</b> . The number of passengers en Protection Contribution (APC) payable.		
PART B – LICENSABLE PASSENGER NUM	BERS AND RELATED REVENUE ON A	DEPARTURE DATE BASIS
Complete the number of <b>passengers depar</b> apply to you insert a zero in the relevant box		
Sub category of Business	Passengers departed	Revenue (gross invoice value)
Flight-Only		£
flight inclusive package		£
Flight-Plus		£
Total Public Sales category		£
ATOL to ATOL (external only)**		
** Licensable transactions constituting seats other than ATOL holders in the same Gro		

PART C – LICENSABLE PASSENGERS DUE TO DEPART AND RELATED REVENUE				
In the boxes below, enter the total number of <b>passengers booked to depart after the period specified at the top of the Form.</b> If any of the types of Public Sales do not apply to you insert a zero in the relevant boxes.				
Sub category of Business	Passengers due to depart	Revenue (gross invoice value)		
Flight-Only		£		
flight inclusive package		£		
Flight-Plus		£		
Total Public Sales category		£		
CERTIFICATION				
a) I certify that the information supplied by me in this form is correct.				
b) I have reviewed the limits for passengers and revenue on the licence, by date of departure, for the Public Sales and ATOL to ATOL categories of business, and:				
expect to remain within all limits during all quarters				
<ul> <li>need to vary the licence and request a variation form for the following categories (tick those required)</li> </ul>				
Public Sales	ATOL to ATOL			
Print Name:				
Title Forename		Surname		
Signed:		Date:		
Authorised Signatory				