

# Notification by a UK AOC operator of a code-share agreement in accordance with Commission Regulation (EU) No. 965/2012 Part-ORO.AOC.115 code-share agreements



This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

## Part A Code-share Statement

<p><b>A1. UK AOC Operator Details</b></p> <p>Name of UK AOC operator: ..... AOC Number: GB .....</p> <p>Address: .....</p> <p>Tel No: ..... E-mail: .....</p> <p>We have entered into a code-share agreement with the third country operator specified below.</p>
<p><b>A2. Third Country Operator Details</b></p> <p>Name of third country operator:..... AOC: Number: .....</p> <p>Address: .....</p> <p>State: .....</p> <p>Tel No..... E-mail.....</p>
<p><b>A3. Statement (*gYVwas applicable)</b></p> <p><b>*Initial</b></p> <p>I confirm that we have verified that this Third Country Operator complies with the applicable ICAO standards. I confirm the required documented information enabling the UK CAA to comply with ARO.OPS.105 is enclosed (<i>see B2 and B3 overleaf</i>).</p> <p><b>*Renewal</b></p> <p>I confirm that we have verified that this Third Country Operator complies with the applicable ICAO standards. I confirm the required documented information enabling the UK CAA to comply with ARO.OPS.105 is enclosed (<i>see B2 and B3 overleaf</i>). This Statement supercedes the previous Statement dated ..... relating to this code-share agreement.</p> <p><b>*Cancellation</b></p> <p>I confirm that the code-share arrangement with this third country operator has been cancelled on: .....</p> <p>Name of Authorisation Manager: .....</p> <p>Signature: ..... Date: .....</p>

**B1 Third-Country Operator: (\*delete as applicable)**

Code-share *Initial Agreement effective date	Renewal
Aircraft types on AOC	
Aircraft types to be used for code-share	
Areas of operation to be used for code-share	

**B2 IOSA**

Audit Programme Manager	
Audit frequency:	
Audit scope:	
Audit location(s):	
IOSA Auditing Organisation:	
Audit report date:	

**B3 Non IOSA**

Audit Programme Manager	
Audit frequency:	
Audit scope:	
Audit location(s):	
Non IOSA Auditing Organisation:	
Audit report date:	
Does the non IOSA audit comply with AMC2 ORO.AOC.115(b)?	
How has the non IOSA auditor competence been verified?	
What other planned monitoring arrangements are in place? (e.g. ramp inspections, flight inspections):	

**C1. Return Address**

Please forward this completed Statement to: [FOASO@caa.co.uk](mailto:FOASO@caa.co.uk)