



P.O. BOX 325, 64 Regent Street, Belize City, Belize, C.A.

LIVE-ABOARD ACCOMMODATION APPLICATION FORM

Application Type:

* Optional Field
● Required at Renewal

1. GENERAL INFORMATION

A) Name of Company:

*B) Previous Name (if any):

2. CONTACT INFORMATION

A) Office Details

i) Physical Address:

District Area

ii) Mailing Address:

* P.O. Box

District Area

iii) Phone 1:

* Cell:

* Fax:

iv) Email:

Website:

B. Owner(s):

Full Name/Company Name	Nationality	Email	Phone #	Share %
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Manager(s):

Full Name/Company Name	Nationality	Email	Phone #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

● **3. EMPLOYMENT INFORMATION**

	Male	Female
A) Number of Local Employees:	<input type="text"/>	<input type="text"/>
B) Number of Foreign Employees:	<input type="text"/>	<input type="text"/>

● **4. TOTAL CABIN INFORMATION**

A) Number of Vessels: Total Number of Cabins:

B) Total Number of Cabins Available for Guest Use:

C) Total Capacity of Passengers: Total Number Beds:

● **5. CHARTER RATES**

A) Low Season Months: - High Season Months: -

B) Single Occupancy: \$ \$

C) Double Occupancy: \$ \$

D) Triple Occupancy: \$ \$

6. SERVICE INFORMATION

A) Service Plans: Bareboat Charter: All-Inclusive Charter: Shared Charter:

B) Amenities and Services Available (List):

<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> House keeping	<input type="checkbox"/> Watersports Equipment
<input type="checkbox"/> All Hot & Cold Water	<input type="checkbox"/> Stocked Bar	<input type="checkbox"/> WiFi Onboard
<input type="checkbox"/> Captain	<input type="checkbox"/> Stocked Kitchen	<input type="checkbox"/> Other <input type="text"/>
<input type="checkbox"/> Chef	<input type="checkbox"/> Telephone Available	

C) Reservation, Booking, Cancellation Policy:

7. INITIAL INVESTMENT AND BUSINESS PROJECTIONS

A) Proposed Operation Date: DD / MM / YY

B) Total Initial Investment (IN BZD \$):

*C) Estimated Number of Charters per Year:

*D) Estimated Number of Guest per Year:

*E) Projected Annual Revenue (IN BZD \$):

8. REQUIREMENT CHECKLIST

Y - Mandatory

A - Mandatory if Applicable

C - Account Modification Form Required if Changed

✓	New	Renew	Accommodation Requirements	Expiration DD / MM / YYYY
<input type="checkbox"/>	Y	Y	Completed Live-aboard Application Form (Signed and Dated)	
<input type="checkbox"/>	Y		Complete Live-aboard vessel template per vessel (Signed and Dated)	
<input type="checkbox"/>	A		Business Name Certificate of Registration	
<input type="checkbox"/>	A		Certificate of Incorporation, Memorandum of Association and Articles of Shares	
<input type="checkbox"/>	A		Copy of Certificate of Good Standing from Companies Registry	
<input type="checkbox"/>	A	A	Environmental Clearance – Department of Environment	
<input type="checkbox"/>	Y	Y	Public Health Standards Inspection	
<input type="checkbox"/>	A	A	Trade License Certificate (if office in town/city)	
<input type="checkbox"/>	A	A	Letter of Support from Village Council (if located in village)	
<input type="checkbox"/>	Y	Y	Public Liability Insurance Coverage	
<input type="checkbox"/>	Y	C	Emergency Preparedness Plan	
<input type="checkbox"/>	Y		Owner(s) / Manager(s) Passport Particulars	
<input type="checkbox"/>	A	C	Letter of Appointment & Authorization for the Manager	
<input type="checkbox"/>	A	C	Residency of Work Permit for Foreigner (Managers only)	
<input type="checkbox"/>	Y	C	Declaration of Service Charge Scheme	

9. TERMS AND CONDITIONS

- a. Your Live-aboard accommodation license is NOT transferable or assignable.
- b. Your Live-aboard accommodation license expires on December 31 and is to be renewed yearly by said date.
- c. You must be able to produce on the vessel:
 - i. Your Live-aboard Accommodation License.
 - ii. A sign requesting each guest to register using the Guest Registration Forms.
- d. Subject to the provisions of this Act, there shall be levied and paid a tax at the rate of 9% of all the accommodation charges in regards to lodging and ancillary services paid or payable.
- e. Payment of the tax, monthly accommodation tax return (MATR), along with the copies of your Guest Registration Forms (GRF) are due no later than the 14th day of the following month.
 - i. The MATR must be submitted monthly, whether the proprietor had guests or not, or whether the vessel was used or not.
 - ii. Your Control ID Number must be entered on your Monthly Accommodation Tax Return. The 8 digit alphanumeric ID consists of 3 alphabets and 5 numerals (e.g. ABD12345)
- f. Where Live-aboard accommodation is in default of the Monthly Tax Filing and/or Payment:
 - i. A Violation Ticket shall be issued in an amount that shall not exceed 3 times the highest declared room rate for the accommodation
 - ii. A late penalty of a 10% on such tax will be charged to the Live-aboard accommodation.
 - iii. A further penalty of 5% on such tax will be applied each 30 days' period or part thereof during which such tax (together with late penalty) is in default.
 - iv. It shall be an offence and the Registrar can take the necessary steps, including Court proceedings for tax recovery.
- g. You are to keep proper accounts books and records at the accommodation office.
 - i. Maintain a register of guest prescribed by the Registrar with the GRF.
 - ii. Keep full and true accounts for all revenue and expenditures of operations.
 - iii. Retain all reservation and accounting documents for a period not less than five years.
- h. The Registrar or any person acting under the authority of the Registrar:
 - i. Has the power of entry and inspection of premises/vessel at all reasonable hours to inspect and examine premises, books and computer records.
 - ii. Has the power to call for any additional information considered necessary for verification of audit.
 - iii. Has the power to issue an assessment for any undeclared taxes or taxes in default.
 - iv. Can issue a violation ticket for offences committed against the Hotel and Tourist Accommodation Act in which a maximum penalty for an offence shall not exceed 3 times the highest declared charter rate for the Live-aboard accommodation of which the offence was committed.
- i. Any changes made to the registry of your Live-aboard accommodation license must be communicated in the prescribed Account Modification form to the Registrar of Hotels and Tourist Accommodation no later than 7 days of the change.
- j. The Registrar may suspend the license of a Hotel and Tourist Accommodation (Live-aboard) who:
 - i. fails to renew its license for the current year.
 - ii. fails to maintain the register of guests;
 - iii. fails to comply with any directions issued by the Registrar from time to time;
 - iv. fails to pay accommodation tax by the prescribed dates;
 - v. fails to provide information called for by the Registrar;
 - vi. fails to display the license, required signs, or any of the information required for guests.
 - vii. obstructs any authorized person from inspecting the premises, records, documents or books of account required to be kept by this Act.
- k. The Registrar may cancel or deregister the license of a Live-aboard Tourist Accommodation who:
 - i. fails to register the Live-aboard;
 - ii. fails to obtain or renew a license;
 - iii. fails to pay Live-aboard accommodation tax on the prescribed dates;
 - iv. fails to pay correct Live-aboard accommodation taxes;
 - v. fails to ensure that the premises/vessel are maintained in keeping with the minimum standards for health, safety, security and service.
- l. If any of the proprietor's agent or employees are convicted of any criminal offense in relation to the premises/vessel under the proprietor's consent, encouragement, knowledge or aid, or if the proprietor knowingly and actively participated in the commission of such offense, the Registrar may suspend or cancel the license.
- m. Upon suspension or cancellation of Live-aboard accommodation license, the Registrar:
 - i. Shall inform proprietor of decision and reason with email.
 - ii. Shall order Live-aboard tourist accommodation to be closed forthwith or on date specified.
 - iii. Shall order the removal of all public signs and advertisements of Live-aboard accommodation.
 - iv. Shall issue a public notice advising of the closure of such Live-aboard accommodation.

10. DECLARATION

I/We declare that all information provided in this application is true, accurate and complete to the best of my/our knowledge. I/We have not withheld any information and understand any falsification is illegal and will disqualify my/our application. I/We agree to all the terms and conditions outlined:

i. Applicant's Name (Print)

ii. Applicant's Signature _____

iii. Applicant's Position

iv: Date

u: Business Stamp/Company Seal

A \$25.00 non-refundable application fee and a license fee of \$5.00 for each cabin must accompany this application.

FOR OFFICIAL USE ONLY

<input checked="" type="checkbox"/> For Official Use Only	Date DD/MM/YY	Print Name/Signature	Comments Actions
<input type="checkbox"/> Form received by BTB			
<input type="checkbox"/> Licensing Officer Check			<input type="checkbox"/> Complete <input type="checkbox"/> Incomplete
<input type="checkbox"/> Licensing Manager Recommendation			<input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended
<input type="checkbox"/> Registrar Approval			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
<input type="checkbox"/> Database Update			
<input type="checkbox"/> Decision Feedback			

Application Fee Paid: BZD \$ Date Paid: Receipt No.:

License Fee Paid: BZD \$ Date Paid: Receipt No.:

License Date:

License #: Licensed Year: Control ID #: