



BELIZE TOURISM BOARD

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

TOUR GUIDE LICENSE REPLACEMENT FORM

Date Submitted: (dd/mm/yyyy) _____

Tour Guide License #		BTB Control ID #	
Name of Applicant:	First Name	Middle Name	Last Name
Sex:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth:	day month year
Address:	Street	Town or City	District
Email Address:		Phone/Cell #	
Employer Name:		Employer Contact #	
Member of Tour Guide Association:			

The following documents must be submitted with Replacement Form:

- Police Report not older than 3 months
- Payment of BZD \$10.00 Replacement Card Fee

DECLARATION

I HEREBY declare the following reason(s) for a license replacement:

I DEEM my previous Tour Guide License irretrievable and hereby apply for a new card for the current license period being year 20____. I HEREBY UNDERTAKE to indemnify the Belize Tourism Board for any consequential issues that may arise from the use of the replacement card in the place of the original.

Signature of Applicant

Date

For Official Use Only

Confirming Licensing Officer

Date

Director of Business Development

Date

Recommending Licensing Manager

Date

Status: Approved | Denied | Committee Review

Receipt # _____ Date Paid: _____