



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

# ACCOUNT MODIFICATION REQUEST FORM

Date Submitted: (dd/mm/yy) \_\_\_\_\_

To: Registrar of Hotels and Tourist Accommodation, I / We hereby submit a modification request to update the information registered for my/our Accommodation License issued to operate under the Hotels and Tourist Accommodation Act, Chapter 285 of the Substantive Laws of Belize – Revised Edition 2011.

Section 10 – Where any change occurs in any matter or thing relating to a hotel or tourist accommodation which necessitates any amendment of the particulars in the registration entry relating to such hotel or tourist accommodation, the registered proprietor shall forthwith give notice of such changes in writing to the Registrar and if such changes affect the license, shall return the license to the Registrar to enable him to make the necessary amendment in the register and the license.

**Please complete all required information in PRINT. Mark an X for fields requesting update. Documentations are required for the changes made.**

1. Type of Modification Request: (circle option)      **General Info | Contact Info | Temp Closure | Deregistration**

2. General Information: (Mandatory Section: Fill all fields)

License # \_\_\_\_\_ Licensed Year \_\_\_\_\_ Control ID # \_\_\_\_\_

a) Name of Hotel or Tourist Accommodation \_\_\_\_\_

b) Location of Property: Street Address \_\_\_\_\_ District \_\_\_\_\_

c) Type or Category of Accommodation \_\_\_\_\_

d) Total Registered Rooms or Units \_\_\_\_\_ Number of New Units Requested \_\_\_\_\_

New Rooms Inspected:    Yes | No      Total New Registered Rooms or Units \_\_\_\_\_

3. Contact Information: (Section required if selected modification type)

a) Mailing Address: PO Box \_\_\_\_\_ Street Address \_\_\_\_\_ District \_\_\_\_\_

b) Accommodation Office No. \_\_\_\_\_ Mobile No. \_\_\_\_\_

c) Accommodation Website \_\_\_\_\_ Email \_\_\_\_\_

d) Name of the appointed Manager or Management Entity \_\_\_\_\_

e) Management Phone No. \_\_\_\_\_ Email \_\_\_\_\_

f) Name of Owner / Ownership Company \_\_\_\_\_

Names of Proprietor(s) or Shareholders	% of the Share(s)	Nationality of the Proprietors or Shareholders	Country of Residence
1.			
2.			
3.			

g) Owner(s) Phone No. \_\_\_\_\_ Email \_\_\_\_\_

4. Temporary Closure: (Section required if selected modification type)

a) Date to commence Temporary Closure: (dd/mm/yy) \_\_\_\_\_

b) Date of reopening: (dd/mm/yy) \_\_\_\_\_

c) Reason for Temporary Closure \_\_\_\_\_

(Note: Filing a monthly nil return report will still be required)



BELIZE TOURISM BOARD

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**5. Deregistration: (Section required if selected modification type)**

a) Commencement date of Deregistration: (dd/mm/yy) \_\_\_\_\_

b) Reason for Deregistration:

Personal Reason(s) \_\_\_\_\_

Sale of Property: New Owner Name \_\_\_\_\_

New Owner Contact No. \_\_\_\_\_ Email: \_\_\_\_\_

Business Not Profitable

Insolvency

Other: \_\_\_\_\_

Official Use: Involuntary Reason:

Non-compliance with taxes: QA comments \_\_\_\_\_

Non-compliance with standards: Audit comments \_\_\_\_\_

c) Do you have any outstanding taxes and fees? Yes | No

If yes, specify outstanding: Taxes \_\_\_\_\_ Penalties \_\_\_\_\_ Other \_\_\_\_\_

Specify outstanding period(s) \_\_\_\_\_ Year \_\_\_\_\_

Comments: \_\_\_\_\_

(Note: A closing audit by BTB is required for verification and the original license must be returned to BTB)

**6. Other Comments:** \_\_\_\_\_

\_\_\_\_\_

**Declaration** (An Authorization letter is required if a third party submits form)

I / We declare that the above given information is true and correct to the best of my/our knowledge.

Owner/Proprietor: Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Manager: Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Business Stamp / Corporate or Company Seal:

For Official Use Only	OK (✓)	Date (dd/mm/yy)	Print Name   Signature	Comments/Actions
Form Received				
Licensing Officer Check				
Receipt of License				
QA Inspection Check				
Audit Clearance Check				
Deregistration Approval				
DP Enforcement Notice				
Public Notice				
Registrar Approval				
Database Update				
Decision Feedback				
DP Enforcement Notice				
Public Notice				

\* Deregistration Required steps

Note: When completed, kindly submit this form to both Licensing at [licensing@belizetourismboard.org](mailto:licensing@belizetourismboard.org) and Taxes at [taxes@belizetourismboard.org](mailto:taxes@belizetourismboard.org).