



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

TOUR GUIDE LICENSE REPLACEMENT FORM

Date Submitted: (dd/mm/yyyy)

SECTION 1 - General Information

Enter your name, personal information, and tour guide credentials.

Tour Guid	e License	#:	BTB Control ID:			
Applicant	's Name:	FIRS	T MIDDLE	LAST		
Gender:	Male	Female	Date of Birth:			
Address:		STREET	TOWN/CITY	DISTRICT		
Email Address:			Phone/Cell #:			
Employer Name:			Employer Conta	Employer Contact #:		
Member o	of Tour Gu	uide Associa	tion:			

The following must be submitted with this Replacement Form:

Copy of deposit slip/payment receipt of \$10.00 from the bank





SECTION 2 - 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.

Applicant's Signature:

2 BTB FORM: TGU202 Date:

FOR OFFICIAL USE ONLY

For Official Use Only	Date DD / MM /YYYY	Signature	Comments Actions		
Form received by BTB					
Licensing Officer Check			Complete	Incomplete	
Licensing Manager			Approved	License	Denied
Printing Date					
Database Update					
Committee Review					