



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 \_\_\_\_\_ Number of New Rooms Requested \_\_\_\_\_

Number of Beds in New Rooms Requested \_\_\_\_\_ New Rooms Inspected: Yes | No

Total New Registered Rooms \_\_\_\_\_

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

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

b) Accommodation Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

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

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

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

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

Names of Proprietor(s) / Shareholder(s)	% of share(s)	Nationality of Proprietor(s) / Shareholder(s)	Contact No. & Email
1.			
2.			
3.			

g) Name(s) of Manager(s):

Names of Manager(s)	Position of Office	Contact No. & Email
1.		
2.		
3.		

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 on or before the 14<sup>th</sup> is still REQUIRED)



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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: Audit comments \_\_\_\_\_

Non-compliance with standards: QA 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)

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

**Declaration** (By Authorized Personnel on Register)

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				
@Wbgl[ 'A U6U[ Yf FYW/a a YbXUhc				
Registrar Approval				
Database Update				
Decision Feedback				
* DP Enforcement Notice				
* Public Notice				

\* Deregistration Required steps