

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

## LIVE-ABOARD VESSEL TEMPLATE

				ed per Vessel	
			Vessel #_	of	-
I. GENERAL INFORMATIO	N				
A) Name of Vessel:					
B) Type of Vessel:					
2. VESSEL INFORMATION					
A) Material of Hull:					
B) Gross Tonnage:		Net Tonnage:			
C) No. of Decks:		No. Of Masts:			
D) Flag:		Year Build:			
E) Manufacturer or Name o	f Builder:				
F) Color of Vessel:					
G) Length:	Breadth:		Depth:		
H) No. of Engines:	Type of Engi	ne:	Speed:		
I) Type of Radio Equipment:			Call Sign:		
3. CABIN INFORMATION					
A) Total Capacity of Passen					
B) Number of Cabins on Ves					
C) Number of Cabins availa	ble for Guest Use:				
D) Number of Beds on board	1:				
4. OWNER(S):					
Full Name/Company N	lame Nati	ionality	Email	Phone #	Share

BTB FORM: ABD02-1219

## **5. REQUIREMENT CHECKLIST**

<b>Y</b> - Mandatory	A - Mandatory if Applicable
C - Account Modification	on Form Required if Changed

New	Renew	Live-aboard Accommodation Requirements	Expiration DD/MM/YYYY
Y	A	Certificate of Current Vessel Registration - Flag	
Υ	Υ	BPA Seaworthiness Certificate/ Commercial Vessel License	
Υ	Α	Customs Entry or Temporary Importation Permit	
Α	С	Lease Agreement or Contract for Management of Vessel	
Α	С	Power of Attorney for Management of Vessel	
Y		Pictures of Vessel (2 outside, 2 inside)	

## 6. DECLARATION

i) Business Name (Print):				
ii) Applicant's Name (Print):				
iii) Applicant's Signature:				
iv) Date:				