

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

## QUALIFIED RETIREMENT INCENTIVES PROGRAM

## **Member Application Form**

Application Type:	NEW   RENEW			Complete Below if Renew
			QRP ID:	
Required at Reneu	Year of Last I	Renewal:	YYYY	
		Years in QRP	Program:	
1. PERSONAL INFORMA	FIRST NAME	LAST NAME		MIDDLE NAME
A) Applicant's Name: B) Gender:	MALE   FEMALE	Age:		
C) Date of Birth:	DD/MM/YY	Place of Birth:		

D) Passport Number:	Expiration Date:	DD/MM/YY
E) Place of Issue:	Nationality:	

### • 2. CONTACT INFORMATION

F) Marital Status:

A) Local/Intended Address:	District:	
B) Overseas Address:	Country:	
C) Local Phone:	Local Cellphone:	
D) International Phone:	Email Address:	

### **3. EDUCATIONAL INFORMATION**

A)	$\bigcirc$	Primary Education	Year of Completion:	YYYY
	$\bigcirc$	Secondary Education	Year of Completion:	YYYY
	$\bigcirc$	Tertiary Education	Year of Completion:	YYYY
	$\Box$	Other:	Year of Completion:	YYYY
B)	Prim	ary Language:	Secondary Language:	

### **4. FINANCIAL INFORMATION**

A) Foreign Source of Pension/Annuity:

• B) Local Financial Institution of Deposit:

### 5. AGENT INFORMATION (if applicable)

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J. A	OLINI		Anon (il applicable)			
A)	Name c	of Agent/C	ompany:			
B)	Phone I	Number:	Email:			
6. D	EPEN	DENT IN	FORMATION (if applicable)			
A)	Numbe	r of depen	dents applying: Adult Children (18 or Under)			
7. RI	EQUIR	EMENT	CHECKLIST Y - Mandatory A - Mandatory if Applicable			
$\checkmark$	New	Renew	Requirements for Applicant			
	Y	Y	Application Form Completed, signed and dated.			
	Y		Birth Certificate Notarized or certified copy.			
$\Box$	Α		Marriage Certificate Notarized or certified copy.			
	Y		Police Record Original police record or certificate from last place of residency (not older than 6 months).			
	Y	Y	<b>Passport Pages</b> Notarized or certified copies of complete passport (valid six or more months from submission date) including all blank pages. Bio data, passport number, and page numbers must be visible (only bio page at renewal).			
	Y		<b>Proof of Pension/Annuity</b> Certificate or document showing applicant as the recipient of pension or annuity amounting to a minimum of Two Thousand Dollars (\$2,000) monthly or Twenty-Four Thousand Dollars (\$24,000) annually in an approved currency viz., US Dollar, Pound sterling, The Euro, Canadian Dollars.			
	Y		<b>Bank Statement certifying Pension/Annuity</b> Original or certified copy of international financial statement from financial institution (bank, credit union, or building society) exhibiting the deposit of the sum stated in (6) above.			
	Y		Written Undertaking of Deposit to Financial Institution in Belize Signed undertaking letter stating the deposit of the required funds into a local domestic financial institution (draft copy provided by the BTB).			
		Y	Bank Statement Original or certified copy of annual statement from local domestic licensed financial institution.			
	Y		Medical Certificate Original Certificate or report of complete medical examination including HIV test (not older than 3 months).			
$\Box$	Y	Y	<b>Two (2) 2"x2" Frontal Photos</b> 1 recent notarized or certified photograph and one unnotarized or uncertified photograph of the same image as per Belize Immigration specifications*.			

# Y Y Application Fee Application fee of One Hundred and Fifty United States Dollars (USD \$150) or Renewal Fee (annually) of Fifty Belize Dollars (BZD \$50)

#### \* Photo Specification

- 1. White background photo must be in focus, with no red-eye and no reflected light on the face
- 2. The head must be a straight position with face directly into the camera
- 3. A neutral facial expression must be maintained (no smiling or frowning)
- 4. The visibility of the eyes is important
- 5. Preferable no glasses, no shades.

### NEW APPLICATION ONLY

Upon final approval of application, you will be contacted by BTB to make your final payment and submission of requested list of duty exemption items to be imported. The complete list of import items must **first** be approved by the BTB and Customs and Excise Department before sending.

- 1. QRP Applicant Member Fee USD \$1,000
- 2. QRP Applicant Card Fee USD \$200

### 8. TERMS AND CONDITIONS

- A) Qualified Retired Persons must obtain approval and adhere to the procedures cited by the Customs and Excise Department for the importation of all personal and household effects, and approved means of transportation.
- B) Qualified Retired Persons shall not be engaged in gainful employment or have an investment that generates income in Belize.
- C) Qualified Retired Persons must inform the Belize Tourism Board of any changes stated on the application form, as soon as such changes occur. Failure to do so may result in revocation of an applicant's status.
- D) Qualified Retired Persons must adhere to all existing Laws of Belize.
- E) All benefits provided by this program apply exclusively to the Qualified Retired Persons and his or her approved dependents.
- F) The Belize Tourism Board has the authority to carry out any investigation with respect to the validity of any documents provided by the applicant under this program.
- G) Participants within this program must inform the Belize Tourism Board prior to leaving country indefinitely so that the assets purchased on this program can be liquidated.
- H) All documents presented to the Belize Tourism Board become the property of the Board.
- I) The applicant shall not have pending criminal matters in any jurisdiction at the time of application.
- J) A QRP must open a local bank account and deposit pension or annuity of Two Thousand (\$2,000) per month or Twenty- Four Thousand (\$24,000) annually in the accepted currency (United States, European or Canadian Dollars).
- K) Qualified Retired Persons must submit a yearly local bank statement showing compliance with the financial requirements of the program.
- L) Qualified Retired Persons must spend an equivalent of thirty (30) consecutive days in Belize annually to maintain their status as a Qualified Retired Person.
- M) A Belizean is not allowed to become a member of the Qualified Retirement Program.
- N) A QRP is not allowed to vote or participate in Village Council, Municipal or General Elections in Belize.
- O) Any fees collected during the application process are non-refundable.

### • 9. DECLARATION

I declare that all information provided in this application is true, accurate and complete to the best of my knowledge. I have not withheld any information and understand any falsification is illegal and will disqualify my application. I agree with all the terms and conditions as pertain to the Belize Retirement Incentives (QRP) Program.

DD/MM/YY	
	DD/MM/YY

F	FOR OFFICIAL USE ONLY						
$\checkmark$	For Official Use Only	Date DD/MM/YY	Print Name/Signature	Comments   Actions			
	Form received by BTB						
$\bigcirc$	QRP SPECIALIST RECOMMENDATION						
$\Box$	Registrar Approval						
	Immigration Approval						
	Database Update						
	Decision Feedback						

Application Fee Paid: QRP Member Fee Paid:	Date Paid: Date Paid:	DD/MM/YY DD/MM/YY	Receipt No.:	
Applicant QRP Member Date:	DD/MM/YY			
QRP ID #:	Valid Year:	Үүүү	Control ID #:	