

	BELIZE TAX SERVICE REGISTRATION FORM		For Official Use Only Date: _____ Signature: _____ BTS150
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Particulars of Business Registration

Registered Name: _____

Registration No. _____ Date Registered: _____

Work Phone Number: _____ Fax Number: _____

Address

Business Address: _____
NUMBER/STREET

_____ CITY

Postal Code _____ Country: _____

E-Mail Address: _____

Business Activity: _____

Owner/Shareholder Information (Submit additional list OR append shareholder register if necessary)

Name	Address	Start Date	Shares/%
Total/Percentage			

* For Corporate shareholders; please complete below:

Corporate Shareholders (not previously reported)

Name	Address	Jurisdiction of Incorporation	Date of Incorporation	Shares/%

Signature: _____ Date: _____

Name: _____ Position: _____

PRINT

OFFICIAL USE ONLY

Received: _____

Signature: _____

TIN # _____

Remittance: _____

Doc No. _____