



BELIZE TAX SERVICE APPLICATION FOR REGISTRATION



Business Entity: Company Partnership Sole Proprietor Other (Specify) _____

Type of Registration: Business Tax General Sales Tax P.A.Y.E.

A. GENERAL INFORMATION

- | | |
|---|---|
| 1. Business Registration Number: _____ | 2. Business Registration Date: _____ |
| 3. Business Activities: Primary _____ Secondary _____ Other _____ | |
| 4. Date Business Activity Commenced: _____ | 5. Date Taxable Activity Commenced: _____ |
| 6. Gross Sale of Activities not including Capital Goods : _____ | 7. Gross Sales from Primary Activity: _____ |

B. TAXPAYER INFORMATION - SOLE PROPRIETOR

- | | |
|--|---------------------------|
| 1. Taxpayer Identification Number: _____ | 2. Social Security: _____ |
| 3. Last Name: _____ First Name: _____ Middle Name: _____ | |
| 4. Maiden Name: _____ | 5. Trade Name: _____ |
| 6. Business Address: _____ | 7. Email Address: _____ |
| 8. Home Address: _____ | 9. Contact Number: _____ |
| 10. Date of Birth: _____ 11. Nationality: _____ | 12. Marital Status: _____ |
- Day/Month/Year

C. TAXPAYER INFORMATION - COMPANY/PARTNERSHIP/NGO

- | | |
|--|-----------------------------|
| 1. Company Name: _____ | 2. Trade Name: _____ |
| 3. Business Address: _____ | 4. Mailing Address: _____ |
| | 5. Foreign/Parent Co: _____ |
| 6. Business Telephone Number(s): _____ | 7. Fax Number(s): _____ |
| 8. Cell Phone Number: _____ | 9. Email Address: _____ |
| 10. Representative: _____ | 11. Position: _____ |

D. REVENUE INFORMATION

- | | | | |
|--|---|-----------------------------|--|
| 1. Do you expect GST Taxable Supplies for the next 12 months to exceed \$75,000? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| 2. Do you expect GST Taxable Supplies to exceed \$6,250.00 monthly for the next 4 months? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| 3. Do you make zero-rated supplies? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| 4. Do you make exempt supplies? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| 5. Are you below the registration threshold (GST) but still wish to be registered? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| 6. Are you a major exporter? Yes <input type="checkbox"/> No <input type="checkbox"/> | 7. Are you an importer? Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| 8. Fiscal Year End: _____ | | | |
| 9. Do you carry out taxable activities in more than one location? (if yes, list locations) | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |

E. OWNER/SHAREHOLDER INFORMATION (submit additional list if space is insufficient)

TIN	Full Name	Home Address	Email Address	Contact No.
a.				
b.				
c.				
d.				
e.				

F. BANK INFORMATION

Name	Address	Branch Number	Accou
a.			
b.			
c.			

G. EMPLOYMENT

Are you an employer? Yes No No. of employees _____ Have you remitted tax withheld? Yes

Do you operate your business: Year Round Seasonally Occasionally

EMPLOYERS: PLEASE COMPLETE THIS SECTION OF THE FORM

Date on which you first became an Employer: _____ Number of Employees: _____

Approximate size of Payroll each Payday: \$ _____ How often do you pay your employees? _____

If you are a seasonal employer, for what periods do you have employees? _____

PLEASE SUBMIT A LIST OF EMPLOYEES IN THE FOLLOWING FORMAT:

	TIN	Full Name	Employment Start Date	Employment End Date (if applicable)
a.				
b.				
c.				
d.				

DECLARATION

I _____, hereby declare that the information given on this application form is true, correct and cor and, I further declare that I have the authority to make this disclosure of the information provided.

_____ Name _____ Signature _____ Position _____

IT IS A SERIOUS OFFENCE TO MAKE A FALSE DECLARATION

FOR OFFICIAL USE ONLY

Date Application Received _____ Effective Date of Registration _____ Rejected _____ New Taxpayer _____ Document # _____

Approved By _____ Position _____ # of Certificates _____ Date Approved/Rejected _____ TIN _____

No

Social Security Number

nplete

Date

Day/Month/Year

**Primary Standard
Industrial Code**

Registration Type