

BELMOPAN CITY COUNCIL
TRADE LICENSE BOARD
Application Form for Trade/Business License:



Existing **New** **Renewal** **Appeal** **Re-Location** **Closure** **Change** **Re-Assessment**

NOTE: 1. Missing or incomplete information can delay processing or result in rejection by the Trade License Board. 2. The City is committed to the success of your businesses. However, we know that there may be issues that may lead to the closure of your business. Please note you **must** submit an application for the closure of a business.

1. **Name of Applicant:** Mr/Mrs/Ms _____
2. **Home Mailing Address: Parcel #:** _____ **House #:** _____ **Street:** _____
3. **Location:** _____ **4. Telephone #** _____
5. **Personal email:** _____
6. **Date of Birth:** _____ (Day/Mth/Year) **7. Birth Place:** _____
8. **Nationality:** _____ **9. Social Security #:** _____
10. **Name of Trade/Business:** _____
11. **Address of Trade/Business: Parcel #:** _____ **House/Unit #:** _____ **Street:** _____
12. **Location:** _____
(Businesses must adhere to the sole location as specified above.)
13. **Is this:** New Construction Modification or Renovation Existing Building
14. **Business Telephone #:** Fixed: _____ Cellular: _____
15. **Business email:** _____
16. **Date of Intended Commencement:** _____
17. **Description of Trade/Business:** _____
(All businesses including LTD's & LLCs must adhere to the description or type of business/trade as specified above)
18. **Same Type of Trade/Business in the Vicinity:** _____
19. **Other Types of Trade/Business in the Vicinity:** _____
20. **Applicant's Annual Rental Value:** _____
21. **Premises' Property Fees Paid-up:** Yes No
22. **Subsequent Changes:** _____

I, _____ (PRINT YOUR NAME)

Declare that the above facts are, in all respects, just and true, and I apply for a License in terms thereof

Dated, this _____ day of _____

Signature of Applicant(s)

Submit completed form to:
 The Local Economic Development Department
 c/o The Clerk of the Trade Licensing Board
 36/38 Trinity Boulevard, City of Belmopan, Cayo District, Belize C.A.

Telephone: 822-2271/822-3992 Ext:248
 Email: led@belmopancitycouncil.org

----- FOR OFFICAL USE ONLY -----

Valuer's Annual Rental Value: _____ **Calculated License Fee:** _____

Property: _____ **Building size:** _____ **Appurtenances:** _____

Zone: _____ **Open Space:** _____ **Valuer:** _____

.....
P/Fee: _____ **Lease:** _____ **Garbage Fee:** _____

INSPECTED AND APPROVED BY:

 Police Department - Approved With Conditions

 Public Health Inspector - Approved With Conditions

 Dept. of Environment - Approved With Conditions

 BMP Engineering Section - Approved With Conditions

 Fire Department - Approved With Conditions