

BELIZE TAX SERVICE REGISTRATION FORM - INDIVIDUALS



For Official Use Only

BTS101

Signature:

Name: LAST NAME FIRST NAME MIDDLE NAME Date of Birth: Sex: Nationality: DAY/MONTH/YEAR Marital Status: Maiden Name: (SINGLE, MARRIED, DIVORCED, SEPARATED, WIDOWED) Profession/Occupation: **IDENTIFICATION NUMBERS** CONTACT INFORMATION Tax Identification Number: Work Number: Home Number: Social Security Number: Other Identification: Type Cell Number: Number Fax Number: Email Address: **EMPLOYMENT INFORMATION Current Employer Name:** Address: Period of Employment: Previous Employer Name: Address: Period of Employment: Previous Employer Name: Address: Period of Employment: **ADDRESSES** Home Address: NUMBER/STREET NAME (CITY/TOWN/VILLAGE/DISTRICT) Mailing Address: NUMBER/STREET NAME (CITY/TOWN/VILLAGE/DISTRICT) City/Town: Post Office Box:

SPOUSE INFORMATION			
Name:			
LAS	T NAME	FIRST NAME	MIDDLE NAME
Contact Number:		Address:	
BANK INFORMATION			
Name	Address	Branch Number	Account Number
Signature:		Date:	
			DAY/MONTH/YEAR
Print Name:		Position:	
	FOR OF	FICIAL USE ONLY	
Date Application Entered	-	Signature	Taxpayer Number