



SHAREHOLDER CONTACT INFORMATION FORM

Belize Electricity Limited Shareholders are encouraged to update their banking and contact information by completing this form and returning directly to BEL's Securities Officer at the address listed below. Please use **BLOCK CAPITALS** throughout this document.

This form is for use by Belize Electricity Limited shareholders.

Full Name

Share Certificate Number(s)

Please indicate your Bank, Credit Union, Government Savings Bank or Building Society Account Number and the address at which you wish to receive your cheque in payment of interest, dividends, etc. This is required for BEL to deposit your cheques.

Name of Bank/Credit Union

Address of Bank/Credit Union

Account Number of Bank/Credit Union

Please indicate your address to which you wish your correspondences to be sent.

Address / Street, Town, District, Country

Postal Code

Telephone Number

Email Address

Signature of Shareholder _____

Date _____

Witness (BEL Agent) _____

Date _____

Return to:

Securities Officer
Belize Electricity Limited
2½ Miles Philip Goldson Highway
P.O. Box 327
Belize City
Belize, C.A.