

JCM Issuance Request Withdrawal Form

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|--|---|--------------------------|
| Type of withdrawal: | <input type="checkbox"/> (a) The project participants voluntarily wish to withdraw a request for issuance for the specified monitoring period <input type="checkbox"/> (b) The TPE has revised its verification report based on new insights and has notified it to the project participants | |
| List of documents to be attached to this form: <i>(Please check)</i> | Revised validation report, if type of withdrawal is (b) | <input type="checkbox"/> |
| | Additional information (Optional: please specify) | <input type="checkbox"/> |
| Reference number: | | |
| Title of the project: | | |
| Third-party entity (TPE) verified the period for which the request was made: | | |
| Reasons for requesting withdrawal of the issuance request: | | |
| Monitoring period covered by this request: | Start: dd/mm/yyyy / End: dd/mm/yyyy | |

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|--|--|-------------------------------------|-------------------------------------|
| Name of the focal point entity (1): | | | |
| Authorised signatory: | | Mr. <input type="checkbox"/> | Ms. <input type="checkbox"/> |
| Last name: | | First name: | |
| Title: | | | |
| Specimen signature: | | Date: dd/mm/yyyy | |
| Name of the focal point entity (2): | | | |
| Authorised signatory: | | Mr. <input type="checkbox"/> | Ms. <input type="checkbox"/> |
| Last name: | | First name: | |
| Title: | | | |
| Specimen signature: | | Date: dd/mm/yyyy | |

[Signatures by the focal points of the project participants as appeared on the MoC]