JCM Registration Request Withdrawal Form

Type of withdrawal:	(a) The project participants voluntarily wish to withdraw a					
	request for registration					
	(b) The TPE has revised its validation opinion based on new					
	insights or information and has notified it to the project					
	participants					
List of documents to be	Revised validation report, if type of withdrawal is (b)					
attached to this form:	Additional information					
(Please check)	(Optional: please specify)					
Reference number:						
Title of the project:						
Date of initial request for	dd/mm/yyyy					
registration submission:						
Third-party entity (TPE)						
validated the project for						
which the request was						
made:						
Reasons for requesting						
withdrawal of the						
registration of request:						
Name of the focal point entity (1):						
Authorised signatory:			Mr. [Ms.	
Last name:			First	name:		
Title:						
Specimen signature: Date: dd/mm/yyyy						
Name of the focal point en	ntity (2):					
Authorised signatory:			Mr. [Ms. 🗌	
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]