Name of ent	ity		
Central offic			
	e Physical address		
	i nysicai addiess		
	Postal address (if		
	different from above)		
	Contact details	Telephone:	
		Mobile:	
		Email:	
Office in Jar	an, if applicable		
	Physical address		
	Postal address (if		
	different from above)		
	Contact details	Telephone:	
		Mobile:	
		Email:	
Office in the	host country, if applicable		
	Physical address	-	
	Postal address (if		
	different from above)		
	Contact details	Telephone:	
		Mobile:	
		Email:	
Application condition	Check as appropriate		
Contantion	<ul> <li>Accredited under ISO 14065 by an accreditation body that is a member of the International Accreditation Forum based on ISO 14064-2.</li> <li>Sectoral scope(s) for validation Sectoral scope(s)</li> </ul>		
	for verification		
	A Designated Operational Entity (DOE) or an operational entity accredited by the Executive Board under the Clean Development Mechanism (CDM).		
	Sectoral scope(s)		
	for validation		
	Sectoral scope(s)		
	for verification		
Sectoral	Validation		
scope (s)			
applied for	(Explanation for		
	selecting the scope(s))		
	Verification		
	, orritourion		
	(Explanation for		
	selecting the scope(s))		
Type of	Check as appropriate		

## JCM Application Form for Designation as a Third-Party Entity

application Initial designation			
Addition of sectoral scopes	5		
Reinstatement of designation	on		
I declare that the information given in this application is correct to the best of my knowledge and belief.			
I conduct to inform the secretariat immediately of any changes with respect to the application and accept			
full responsibility for any costs incurred as a result of any changes not reported to the secretariat in line			
with the procedures for designation.			
On behalf of the entity, I declare that all the applicable JCM rules and guidelines are understood.			
Name			
Position (state position if other than CEO)			
Date			
Signature			