JCM Registration Request Withdrawal Form

Type of withdrawal: List of documents to be attached to this form:	 □ (a) The project participants voluntarily wish to withdraw request for registration □ (b) The TPE has revised its validation opinion based on reinsights or information and has notified it to the proparticipants Revised validation report, if type of withdrawal is (b) 	new
(Please check)	Additional information	
	(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 en	ntity:	
Authorised signatory:	Mr.	
Last name:	First name:	
Title:		
Specimen signature: Date: dd/mm/yyyy		ууу

[Signature by the focal point of the project participants as appeared on the MoC]

^{*}Tables should be added, if more than one focal point is designated.