

JCM Application Form for Designation as a Third-Party Entity

Name of entity		
Central office		
	Physical address	
	Postal address (if different from above)	
	Contact details	Telephone: Mobile: Email:
Office in Japan, 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	<p>Check as appropriate</p> <p><input type="checkbox"/> Accredited under ISO 14065 by an accreditation body that is a member of the International Accreditation Forum based on ISO 14064-2. Sectoral scope(s) for validation Sectoral scope(s) for verification</p> <p><input type="checkbox"/> 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</p> <p><input type="checkbox"/> A Designated Operational Entity (DOE) accredited by the Supervisory Body of the Article 6.4 Mechanism. Sectoral scope(s) for validation Sectoral scope(s) for verification</p>	
Sectoral scope (s) applied for	Validation ----- (Explanation for selecting the scope(s))	

	Verification (Explanation for selecting the scope(s))	
Type of application	Check as appropriate <input type="checkbox"/> Initial designation <input type="checkbox"/> Addition of sectoral scopes:.....(please specify sectoral scope(s)) <input type="checkbox"/> Reinstatement of designation:.....(please specify sectoral scope(s))	
<p>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.</p> <p>On behalf of the entity, I declare that all the applicable JCM rules and guidelines are understood.</p>		
Name		
Position (state position if other than CEO)		
Date		
Signature		