

### JCM Project Registration Request Form

|   |                      |                          |
|---|----------------------|--------------------------|
| List of documents to be attached to this form<br><i>(Please check to confirm)</i> | PDD (latest version) | <input type="checkbox"/> |
|   | MoC                  | <input type="checkbox"/> |
|   | Validation report    | <input type="checkbox"/> |
| Reference number  |                      |                          |
| Title of the project  |                      |                          |
| Focal point entity  |                      |                          |
| Third-party entity (TPE)  |                      |                          |
| Applied methodology   | No.                  |                          |
|   | Version              |                          |
|   | Title                |                          |
|   | Sectoral scope       |                          |

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

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

\*Tables should be added, if more than one focal point are designated.