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)	\Box
attached to this form:		
(Please check)	Additional information	
(1 rease encery	(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	itity:	
Authorised signatory:	Mr.	
Last name:	First name:	
Title:		
Specimen signature: Date: dd/mm/y		′уу

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