**JCM Post-Registration Changes Request Form**

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| --- | --- | --- |
| List of documents to be attached to this form:  *(Please check)* | Revised PDD |  |
| Additional information  (Optional: please specify……………………….) |  |
| Reference number: |  | |
| Title of the project: |  | |
| The third-party entity which identified changes during verification, if applicable: |  | |
| Summary of the proposed changes:  *(Please state the summary of your proposed changes in approximately 300 words)* |  | |
| Justification that the proposed changes would not prevent the use of the applied methodology |  | |

|  |  |  |
| --- | --- | --- |
| **Name of the focal point entity:** |  | |
| **Authorised signatory:** | |  |
| **Last name:** | | **First name:** |
| **Title:** | | |
| **Specimen signature:** **Date:** 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.