JCM Application Form for Designation as a Third-Party Entity

Name of enti	ty	
Central office		
	Physical address	
	Postal address (if different from above)	
	Contact details	Telephone: Mobile: Email:
Office in Japa	an, if applicable	
	Physical address	
	Postal address (if different from above)	
	Contact details	Telephone: Mobile: Email:
Office in the	host country, if applicable	
Office in the	Physical address	
	Postal address (if different from above)	
	Contact details	Telephone: Mobile: Email:
Application condition	Check as appropriate	
		SO 14065 by an accreditation body that is a member of the ration Forum based on ISO 14064-2.
	☐ 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	
Sectoral scope (s) applied for	Validation	
	(Explanation for selecting the scope(s))	
	Verification	
	(Explanation for selecting the scope(s))	
Type of	Check as appropriate	

application	☐ Initial designation		
	Addition of sectoral scopes		
	Reinstatement of designation		
I declare that	the information given in this application is correct to the best of my knowledge and belief.		
I conduct to i	nform the secretariat immediately of any changes with respect to the application and accept		
	pility for any costs incurred as a result of any changes not reported to the secretariat in line		
with the procedures for designation.			
On behalf of	the entity, I declare that the all applicable JCM rules and guidelines are understood.		
Name			
Position (stat	e position if other than CEO)		
Date			
Signature			