# PRELIMINARY ASSESSMENT REPORT

<table>
<tr><td>Entity name and address of site(s) assessed</td><td colspan="2"></td></tr>
<tr><td>UNFCCC ref no.:</td><td colspan="2"></td></tr>
<tr><td rowspan="2">Type of report</td><td></td><td>Single document in accordance with the detailed procedures for applications which identified witnessing activity opportunities</td></tr>
<tr><td></td><td>This report constitutes Part 1/Part 2 of a preliminary report (please underline) in accordance with the detailed procedures for applications without witnessing opportunities identified at application.</td></tr>
<tr><td>Name of the scope assessed</td><td colspan="2"></td></tr>
<tr><td>CDM-AT leader</td><td colspan="2"></td></tr>
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## SUMMARY

*The summary should address the following aspects:*

- *An assessment of the competence and experience of the organization in the scope of accreditation assessed. The names of key staff encountered and their qualifications, experience and authority shall be attached or alternatively a cross references to where information is identified may be provided;*
- *The adequacy of the internal organization and procedures adopted by the applicant entity ensuring confidence in the quality of its services;*
- *Description of the validation and/or verification/certification activities witnessed;*
- *A description of the conformity of the applicant entity with the accreditation requirements, in particular in regard to key areas or issues identified by the CDM-AP and, where applicable, any useful comparisons with the results of previous assessments of the applicant entity;*
- *An identification and description of non-conformities. One non-conformity form (F-CDM-NC) is to be attached for each non-conformity.*
- *The Overall conclusion of the CDM-AT*

*Instead of repeating detailed information cross-references to forms used in this assessment shall be provided, as applicable. In accordance with the detailed procedures to operationalize the accreditation of operational entities under the CDM this summary may be provided in two parts.*

**Administration of assessment:**

- State the date(s) (*DD/MM/YYYY*) of the assessment(s): Indicate the type of assessment i.e. whether an on-site assessment, witnessing or other activity was carried.
- List the names of the CDM-AT responsible for this report:
- List the names and address(es) of all the relevant entity sites assessed:

| **Documents supplied by the applicant and reviewed by the CDM-AT** | | |
|---|---|---|
| **Document** | **Copy available** | **Reviewed** |
| Application for accreditation | | |
| Documentation on its legal status | | |
| Particular documents related to a scope of accreditation (see description of scope) | | |
| A declaration of all the organization's actual and planned involvement in CDM project activities | | |
| A declaration that the applicant entity has not pending any judicial process for malpractice, fraud and/or other activity incompatible with its functions | | |
| Documentation on its quality assurance policy and procedures | | |
| Documentation on administrative procedures including document control | | |
| An organizational chart showing lines of authority, responsibility and allocation of functions | | |
| Documentation on its procedures for handling complaints, appeals and disputes | | |
| **List of documents prepared in relation to this assessment (e.g. work plan, on-site assessment report, non-conformity forms)**: | | |
| **Signature by CDM-AT team leader:** | **Date:** | |