



**Component project activity exclusion request form
(Version 03.0)**

SECTION 1: GENERAL INFORMATION

Title and UNFCCC reference number of the programme of activities (PoA)		
Name of the coordinating/managing entity (CME)		
Titles and reference numbers of the component project activities (CPAs) requested for exclusion <i>(Add rows as needed)</i>	CPA Ref. no.	Title
Host Parties of the CPAs requested for exclusion <i>(Add rows as needed.)</i>	CPA Ref. no.	Host party

SECTION 2: REQUEST FOR EXCLUSION

We hereby request the exclusion of the CPAs from the PoA	<i>To be filled by the CME</i>
	Date (dd/mm/yyyy):
	Name of CME representative:
	Signature:
	<i>To be filled by the CPA implementers (Add rows as needed)</i>
	Reference number of the CPA:
	Date (dd/mm/yyyy):
	Name of the representative of the CPA implementer:
	Signature:
	Reference number of the CPA:

	Date (dd/mm/yyyy):
	Name of the representative of the CPA implementer:
	Signature:

Document information

<i>Version</i>	<i>Date</i>	<i>Description</i>
03.0	31 May 2019	Revision to make structural and editorial improvements.
02.0	15 June 2017	Structural and editorial improvement.
01.0	17 March 2015	Initial publication.

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