



## REQUEST FOR REVIEW OF REQUEST FOR ISSUANCE FORM FOR ARTICLE 6.4 PROGRAMMES OF ACTIVITIES

(Version 01.0)

### SECTION 1. GENERAL INFORMATION

<b>Submitter of the request for review:</b> <i>(Select one option)</i>	<input type="checkbox"/> Designated National Authority (DNA) of the host Party <b>Name of the host Party:</b> Choose a Party. <b>Name of the DNA:</b> >> <i>Provide the name of the DNA</i>								
	<input type="checkbox"/> Designated National Authority (DNA) of the other participating Party <b>Name of the participating Party:</b> Choose a Party. <b>Name of the DNA:</b> >> <i>Provide the name of the DNA</i>								
	<input type="checkbox"/> Supervisory Body member or alternate member <b>Name of the member or alternate member:</b> >> <i>Provide the name of the member or alternate member</i>								
<b>Date of submission of the request for review form:</b>	Enter a date.								
<b>PoA title:</b>	>> <i>Provide the PoA title</i>								
<b>UNFCCC reference number:</b>	>> <i>Provide the UNFCCC reference number of the PoA determined at the submission of the notification of prior consideration.</i>								
<b>CPs included in the request for issuance:</b> <i>(add/remove rows if needed)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">CP reference number</th> <th style="width: 50%;">CP title</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">&gt;&gt;</td> <td style="text-align: center;">&gt;&gt;</td> </tr> <tr> <td style="text-align: center;">&gt;&gt;</td> <td style="text-align: center;">&gt;&gt;</td> </tr> <tr> <td style="text-align: center;">&gt;&gt;</td> <td style="text-align: center;">&gt;&gt;</td> </tr> </tbody> </table>	CP reference number	CP title	>>	>>	>>	>>	>>	>>
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	<i>Provide the UNFCCC reference number of the CPs determined at the submission of the notification of prior consideration</i>								
<b>Monitoring period:</b>	<table style="width: 100%;"> <tr> <td style="width: 50%;"><b>Start date:</b> Enter a date.</td> <td style="width: 50%;"><b>End date:</b> Enter a date.</td> </tr> </table> <i>Provide the start and end-date of the monitoring period</i>  <b>Sequence number:</b> >> <i>Provide the sequence number of the monitoring period within the PoA period (e.g. 01 if it is the 1<sup>st</sup> monitoring period, 02 if it is the 2<sup>nd</sup> monitoring period, ...)</i>  <b>Batch number:</b> >> <i>Provide batch number if multiple separate monitoring reports are prepared for the same monitoring period</i>	<b>Start date:</b> Enter a date.	<b>End date:</b> Enter a date.						
<b>Start date:</b> Enter a date.	<b>End date:</b> Enter a date.								

### SECTION 2. REASONS FOR THE REQUEST FOR REVIEW

*(Please elaborate the reason for requesting a review based on the on the "Article 6.4 activity standard for programmes of activities", "Article 6.4 validation and verification standard for programmes of activities" or any other applicable Article 6.4 mechanism rules and requirements)*

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**Document information**

<i>Version</i>	<i>Date</i>	<i>Description</i>
01.0	9 January 2025	Initial publication of form template.
Decision Class: Regulatory		
Document Type: Form		
Business Function: A6.4 activity cycle		
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