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|  | | **APPEAL SUBMISSION FORM**  **(Version 01.0)** | | | | | | | | | | | | | | |
| 1. Section 1. Standing | | | | | | | | | | | | | | | | |
| Details of the appellant: | | | | Select if the appellant wants the details below to be treated as confidential | | | | | | | | | | | | |
| **Name:** | >> | | | | | | | | | | | |
| **Address:** | | | | >> | | | | | | | | |
| **Country:** | | | | >> | | | | | | | | |
| **E-mail:** | | | | >> | | | | | | | | |
| **Phone number:** | | | | | | | >> | | | | | |
| Relationship of the appellant with the activity: | | | | >>  *Describe the relationship of each individual and organization listed as the appellant to the activity in question* | | | | | | | | | | | | |
| Details of the focal point of the appellant: | | | | Select if the appellant wants the details of the focal point below to be treated as confidential | | | | | | | | | | | | |
| **Name:** | >> | | | | | | | | | | | |
| **Address:** | | | | >> | | | | | | | | |
| **Country:** | | | | >> | | | | | | | | |
| **E-mail:** | | | >> | | | | | | | | | |
| **Phone number:** | | | | | | | >> | | | | | |
| Details of the authorized representative of the original appellant: *(Fill the details if applicable)* | | | Select if the details of authorized representatives below shall be treated as confidential | | | | | | | | | | | | | |
| **Name:** | | | >> | | | | | | | | | | |
| **Address:** | | | | | | | >> | | | | | | |
| **Country:** | | | | | | | >> | | | | | | |
| **E-mail:** | | | | | | >> | | | | | | | |
| **Phone number:** | | | | | | | | | >> | | | | |
| Check to confirm that the evidence of authorization (including signature of the appellant) is submitted.  >>  *List the evidence* of authorization *provided* | | | | | | | | | | | | | |
| Category of appellant: *(Select one option)* | | | | Stakeholder eligible to participate in the activity's local stakeholder consultation.  Activity participant as identified in the modalities of communication.  Designated National Authority (DNA) of the host Party(ies) and other participating Party(ies) of the activity.  DNA of the host Party(ies) where the Party-specific elements of methodological product are applicable. | | | | | | | | | | | | |
| >>  *Justify the choice above* | | | | | | | | | | | | |
| Date of the submission: | | | | Enter a date. | | | | | | | | | | | | |
| 1. Section 2. Scope *(Select one option)* | | | | | | | | | | | | | | | | |
|  | **Approval or rejection of a request for registration of a proposed activity or inclusion of a proposed CP in a registered PoA** | | | | | | | | | | | | | | | |
| **UNFCCC reference number:** | | | >>  *Enter the UNFCCC reference number of the project, PoA or CP determined at the submission of the notification of prior consideration* | | | | | | | | | | | | |
| **Activity title:** | | | >>  *Enter the title of the project, PoA or CP* | | | | | | | | | | | | |
| **Details of the decision:** | | | **Date of the decision:** | | | | | | | | | | Enter a date. | | |
| **Supervisory Body meeting number and paragraph(s) of the report (if applicable):** | | | | | | | | | | | | >>  *Enter the SBM meeting number and relevant paragraphs (e.g. SBM012, paragraph 5(a)(ii))* |
| Approval of a request registration of a project or PoA, or inclusion of a CP. | | | | | | | | | | | | |
| Rejection of a request registration of a project or PoA, or inclusion of a CP. | | | | | | | | | | | | |
|  | **Approval or rejection of a request for approval of a post-registration change to a registered activity, or approval or rejection of a notification of post-registration change to a CP in a registered PoA** | | | | | | | | | | | | | | | |
| **UNFCCC reference number:** | | | >>  *Enter the UNFCCC reference number of the project, PoA or CP determined at the submission of the notification of prior consideration* | | | | | | | | | | | | |
| **Activity title:** | | | >>  *Enter the title of the project, PoA or CP* | | | | | | | | | | | | |
| **Post-registration change number:** | | | >>  *Enter the number of the post-registration change* | | | | | | | | | | | | |
| **Details of the decision:** | | | **Date of the decision:** | | | | | | | | | | Enter a date. | | |
| **Supervisory Body meeting number and paragraph(s) of the report (if applicable):** | | | | | | | | | | | | >>  *Enter the SBM meeting number and relevant paragraphs (e.g. SBM012, paragraph 5(a)(ii))* |
| Approval of a request for post-registration change of a project or PoA, or of a notification of post-registration change to a CP in a registered A6.4 PoA. | | | | | | | | | | | | |
| Rejection of a request registration of a project or PoA, or of a notification of post-registration change to a CP in a registered A6.4 PoA. | | | | | | | | | | | | |
|  | **Approval or rejection of a request for issuance of A6.4ERs for a registered activity** | | | | | | | | | | | | | | | |
| **UNFCCC reference number:** | | | >>  *Enter the UNFCCC reference number of the project, PoA or CP determined at the submission of the notification of prior consideration* | | | | | | | | | | | | |
| **Activity title:** | | | >> *Enter the title of the project or PoA* | | | | | | | | | | | | |
| **Monitoring Period:** | | | **Start date:** Enter a date. | | | | | | | | | | | **End date:** Enter a date. | |
| **Sequence number:** | | | | | | | | | >>  *Enter the sequence number of the monitoring period within the crediting period (e.g. 01 if it is the 1st monitoring period, 02 if it is the 2nd monitoring period, …). For PoAs, also indicate which is the batch (e.g. 01.02 if is the 1st request for issuance for a 2nd batch of CPs)* | | | |
| **Details of the decision:** | | | **Date of the decision:** | | | | | | | | | | Enter a date. | | |
| **Supervisory Body meeting number and paragraph(s) of the report (if applicable):** | | | | | | | | | | | | >>  *Enter the SBM meeting number and relevant paragraphs (e.g. SBM012, paragraph 5(a)(ii))* |
| Approval of a request for issuance of A6.4ERs for a registered A6.4 activity. | | | | | | | | | | | | |
| Rejection of a request for issuance of A6.4ERs for a registered A6.4 activity. | | | | | | | | | | | | |
|  | **Approval or rejection of a request for renewal of the crediting period or PoA period of a registered activity, or approval or rejection of a notification of renewal of the crediting period of a CP included in a registered PoA** | | | | | | | | | | | | | | | |
| **UNFCCC reference number:** | | | >>  *Enter the UNFCCC reference number of the project, PoA or CP determined at the submission of the notification of prior consideration* | | | | | | | | | | | | |
| **Activity title:** | | | >>  *Enter the title of the project, PoA or CP* | | | | | | | | | | | | |
| **Crediting period to which renewal is being requested:** | | | **Start date:** Enter a date. | | | | | | | | | | | **End date:** Enter a date. | |
| **Sequence number:** | | | | | | | | | >>  *Enter the sequence number of the crediting period for project or CP, or the PoA period to which renewal is being requested (i.e. 2nd or 3rd)* | | | |
| **Details of the decision:** | | | **Date of the decision:** | | | | | | | | | | Enter a date. | | |
| **Supervisory Body meeting number and paragraph(s) of the report (if applicable):** | | | | | | | | | | | | >>  *Enter the SBM meeting number and relevant paragraphs (e.g. SBM012, paragraph 5(a)(ii))* |
| Approval of a request for renewal of the crediting period of a project or PoA period, or of a notification of renewal of the crediting period of a CP. | | | | | | | | | | | | |
| Rejection of a request for renewal of the crediting period of a project or of PoA period, or of a notification of renewal of the crediting period of a CP. | | | | | | | | | | | | |
|  | **Appeal by a DNA against the application of Party-specific elements of methodological products that are applicable to that host Party** | | | | | | | | | | | | | | | |
| **Type of methodological product** | | | Approved methodology.  Approved methodological tool.  Approved standardized baseline.  Other approved methodological product.  >>  *Specify the methodological products (e.g. standard, guidelines, etc).* | | | | | | | | | | | | |
| **Methodological product name and reference:** | | | >>   *Enter the name and reference of the methodological product* | | | | | | | | | | | | |
| **Elements of methodological products:** | | | >>  *Specify which elements of the methodological products are subject to the appeal* | | | | | | | | | | | | |
| **Details of the decision:** | | | **Date of the decision:** | | | | | | | | | | Enter a date. | | |
| **Supervisory Body meeting number and paragraph(s) of the report (if applicable):** | | | | | | | | | | | | >>  *Enter the SBM meeting number and relevant paragraphs (e.g. SBM012, paragraph 5(a)(ii))* |
| 1. Section 3. Grounds | | | | | | | | | | | | | | | | |
| Category of the ground: *(Select one option)* | | | | Supervisory Body exceeded its authority or mandate as defined in the RMPs and other relevant CMA decisions.  Supervisory Body’s application of one or more provisions in the RMPs, of other relevant CMA decisions or of applicable standards and procedures adopted by the Supervisory Body, was either incorrect or unreasonable, such that if applied correctly, it may have resulted in a materially different outcome.  The Supervisory Body made an error in relation to a material fact, irrespective of whether such fact was available to the Supervisory Body at the time of its decision, and the error may have materially affected the appealable decision on its merits  Information provided by the designated operational entity (DOE) or the activity participants on which the Supervisory Body made the decision contained an error or misstatement that materially affected the decision. | | | | | | | | | | | | |
| Sworn statement:  *(Check this option to confirm the submission of a sworn statement)* | | | | A sworn statement on the grounds appeal and relevant facts and arguments that form the grounds for the appeal is attached to this submission. | | | | | | | | | | | | |

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| * 1. Details of the ground |

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*Provide a detailed statement of the relevant facts and arguments that form the grounds for the appeal. Attach to the submission any additional documentation and explain how this documentation is used to support the arguments.*

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| * 1. List of references |

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*Provide a list of the additional documentation used to support the arguments with an explanation as to how the supporting documents and other information support the arguments made in the appeal.*

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Document information

| Version | Date | Description |
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| 1. 01.0 | 1. 9 May 2025 | 1. Initial publication of form template. |
| 1. Decision Class: Regulatory Document Type: Form Business Function: Governance  Keywords: A6.4 mechanism, A6.4 projects, A6.4 programme of activities, appeals and grievances | | |