



Renewal of programme of activities period request form

(Version 01.0)

By submitting this signed form and its supporting documentation, the designated operational entity (DOE) declares that, in undertaking validation of the renewal of the CDM programme of activities (PoA) period, it has no financial interest related to the PoA, and that undertaking such validation does not constitute a conflict of interest that is incompatible with the role of a DOE under the CDM.

SECTION 1: GENERAL INFORMATION OF REQUEST

Name and UNFCCC reference number of the DOE	CarbonCheck_Cert
Title and UNFCCC reference number of the PoA	00009626, DelAgua Public Health Program in Eastern Africa
Name of the coordinating/managing entity	DelAgua Health Rwanda Limited
We confirm that this PoA meets all relevant validation requirements and hereby request for renewal of the PoA period	Date (dd/mm/yyyy): 05/02/2021
	Name of DOE representative: PRIYA SUMAN
	Signature: <i>Priya Suman</i>

SECTION 2: DOCUMENTS SUBMITTED

List of documents to be attached to this form (Tick boxes)	<input checked="" type="checkbox"/> Updated PoA-DD form of the PoA (latest version) <input checked="" type="checkbox"/> The completed validation report form (latest version) <input checked="" type="checkbox"/> All other documents listed in the completeness checklist for requests for renewal of PoA period <input checked="" type="checkbox"/> Supplemental documents <ul style="list-style-type: none"> PoA-DD V5.3_TC.pdf 833_9626_RCP PoA FVR_rev_Track change.pdf
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Document information

<i>Version</i>	<i>Date</i>	<i>Description</i>
01.0	20 June 2017	Initial publication.
Decision Class: Regulatory		
Document Type: Form		
Business Function: Renewal of crediting period		
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