## **CDM-MOC-FORM: ANNEX 2**

This annex is to be used by the focal point(s) for scope of authority (b) or by the submitting project participant when applicable, to request changes to project participant status and contact details of focal points following project/programme registration.

| Date of submission:   |   |  | 12/04/2017           |  |
|---|---|--|----------------------|--|
| SECTION 1: CD   | M PROJECT/PROG                                      | RAMME OF ACTIVITIES  | DETAILS              |  |
| Title of the project / programme of activities:   |   | Community-Based Renewable Energy Development in the Northern Areas and Chitral (NAC), Pakistan |                      |  |
| Project / programme of activities reference number:   |   | 1713   |                      |  |
| SECTION 2: ADDITIO  |   | GAL NAME OF A PROJEC<br>FY/IES   | T PARTICIPANT        |  |
| ☑Add project participant entity ☐Change legal name of project p The following entity is hereby add project / programme of activities. acceptance of the current modalit | led as a project particip<br>By providing a specime | ant or is newly named in respo   | ect of the above CDM |  |
| Name of entity:<br>Statkraft Markets GmbH   |   |  |                      |  |
| Address: Derendorfer Allee 2a 40476 Dusseldorf Germany  |   |  |                      |  |
| Party (country authorizing participation): Germany  |   |  |                      |  |
| End-date of participation:  | N/A (participation                                  | is not limited in time) dd/mr  | n/yyyy               |  |
| Contact details (primary authorized signatory):   |   | Mr.⊠ Ms.□  |                      |  |
| Last name: Peters   |   | Telephone 1:   |                      |  |
| First name: Stef  |   | Telephone 2 (optional):  |                      |  |
| Email:  |   | Fax (optional):  |                      |  |
| Specimen signature:   |   | Date (dd/mm/yyyy):   |                      |  |
| Contact details (alternate authorized signatory):   |   | Mr. ⋈ Ms. □  |                      |  |
| Last name: Karreman   |   | Telephone 1:   |                      |  |
| First name: Arjan   |   | Telephone 2 (optional):  |                      |  |
| Email:  |   | Fax (optional):  |                      |  |
| Specimen signature:   |   | Date (dd/mm/yyyy):   |                      |  |
|   |   | ( 3333)  |                      |  |
|   |   |  |                      |  |
| Name of entity:<br>Enel Trade S.p.A.  |   |  |                      |  |
| Address: Viale Regina Margherita 125 00198 Rome Italy  Party (country authorizing partic  | ipation):   |  |                      |  |
| Italy   |   |  |                      |  |

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| End-date of participation:  | ☑ N/A (participation is not limited in time) ☐ dd/mm/yyyy |                         |                  |  |
|---|---|-------------------------|------------------|--|
| Contact details (primary authorized signatory):                   |   | Mr. ⋈ Ms. □             |                  |  |
| Last name: Zannella   |   | Telephone 1:            |                  |  |
| First name: Leonardo  |   | Telephone 2 (optional): |                  |  |
| Email:  |   | Fax (optional):         |                  |  |
| Specimen signature:   |   | Date (dd/mm/yyyy):      |                  |  |
|   |   |                         |                  |  |
| Signature(s) of the focal point for Name of authorized signatory: | scope of authority (b)                                    | Signature               | Date: dd/mm/yyyy |  |
| (Add lines for signatories as necess                              |   |                         |                  |  |